

Efficacy and safety of Clobazam in a Pediatric refractory epilepsy population less than two years of age and below:

Ersida Buraniqi

Mayo Clinic, USA

Abstract

Aim: To describe our experience with the efficacy and safety of clobazam in refractory epilepsy in a large population of Children less than two years of age.

Methods: We retrospectively reviewed all patients between 0 and 2 years of age at Boston Children's Hospital from October 2011 to December 2016. We included patients who were treated with clobazam for refractory epilepsy, and who had a follow-up visit at least one month after starting clobazam. Response to clobazam was defined as >50% reduction in seizure frequency at the time of last follow-up visit as compared to baseline.

Results: 155 patients received clobazam, of which 116 [median age 12 months, IQR (p25-p75) 8-16 months] had full follow-up data ≥ 1 month after starting clobazam. Median follow-up age was 14 months [IQR (p25-p75) 9-18 months]. At the time of clobazam initiation, 31/116 (27%) patients were on one antiepileptic drug (AED), 52/116 (45%) patients were on two AEDs, and 26/116 (22%) patients were on three or more AEDs. 7/116 (6%) patients received clobazam monotherapy. Overall response rate was 33% (38/116) with a median seizure reduction of 75%. 18 (16%) patients had $\leq 50\%$ reduction, 14 (12%) had no change and 16 (14%) had worsening of seizure frequency. 30 (26%) patients became seizure free. 8 (7%) patients discontinued clobazam.

Conclusions: Clobazam is both well tolerated and effective in reducing seizure frequency in Pediatric patients less than two years of age with refractory epilepsy.

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Biography

Ersida Buraniqi has completed her MD from Istanbul Faculty of Medicine and Postdoctoral studies from Boston Children's Hospital and Harvard Medical School. She is now a Child Neurology Resident at Mayo Clinic. She has presented her

scientific work in more than 15 national and international conferences and meetings. She has published five papers in reputed journals and has been serving as an Editorial Board Member of repute.