

Letter to the Editor

Comparing the quality of life of patients with epilepsy receiving conventional and newer antiepileptics in a tertiary care hospital, Northern India

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Received: 24 July 2024
Accepted: 11 October 2024
Epub Ahead of Print: 07 February 2025
Published:

DOI
10.25259/IJPP_393_2024

Quick Response Code:



Dear Editor,

I am writing this letter to share my opinion regarding the article recently published under the view of 'Comparing Quality of Life (QoL) in Patients with Epilepsy Receiving Old Antiepileptics versus Newer Ones using QoL-31 Questionnaire: A Tertiary Care Hospital-Based Study from North India'^[1] in *Indian Journal of Physiology and Pharmacology*.

I shall begin by congratulating the authors for such a remarkable study of this important subject. The comparison of conventional antiepileptic drugs (AEDs) with more recently introduced ones is important for both clinical practice and patient care, particularly regarding their effect on the QoL in patients who have epilepsy.

The method of the study was apt, using valid tools and being conducted in a tertiary care hospital where chances of bias are less.

Authors attempt to differentiate each domain of QoL, such as physical health and psychological and social well-being, between conventional AEDs and modern; therefore, for the clinician, here lies a fruitful comparative study.

I want to write some critical analysis feedback and advice:

Demographic data: Although there is an overall demographic description in the study, a thorough analysis of age has not been done that could provide stronger evidence on this aspect with respect to how different factors, such as gender, might affect QoL outcome.^[2]

Cross-sectional design: The study provides details of QoL at one time with a cross-sectional design but an across-time quality for longitudinal follow-up. A longitudinal follow-up study would be able to learn how QoL changes with continued use of classic versus newer AEDs over time.^[3,4]

Characteristics of side effect profile: Comparative listing of all side effects for old and newer AEDs to help understand how they can impact QoL. Adverse effects are an important side effect of medication in a patient, which plays a major role in adherence to their treatment and morbidity.^[3]

Patient-orientation: Including patient-oriented outcomes (e.g., satisfaction and adherence to therapy) might give a more complete picture of how these treatments have impacted patient's lives.

In conclusion, this study is a valuable addition to the field of epilepsy treatment and emphasises the need for personalised treatment strategies to enhance patient's quality of life. I hope that

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the authors consider these suggestions for future research to enrich further our understanding of the impact of antiepileptic medications on patient's lives.

Thank you for the opportunity to comment on this important work.

Use of artificial intelligence (AI)-assisted technology for manuscript preparation: The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

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How to cite this article: Khan Z, Dixit RK. Comparing the quality of life of patients with epilepsy receiving conventional and newer antiepileptics in a tertiary care hospital, Northern India. *Indian J Physiol Pharmacol*. doi: 10.25259/IJPP_393_2024