Evaluation of the Efficacy and Availability of Clonazepam for Increased Seizures during Acute Illness in Children

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Introduction

• In times of acute illness pediatric patients may have an increased frequency of seizures.
• There is no data using benzodiazepines for preventing breakthrough seizures during acute illness.
• Short-term (i.e. bridge) clonazepam is often used at Cardinal Glennon Children’s Hospital (CGCH) during acute illness in pediatric patients with a history of seizures.
• The previous study established baseline dosing and patient characteristics
  • Most common regimens included 0.125 mg by mouth twice daily for a total of 3 days.

Methods

• Single center retrospective chart review of patients seen at CGCH during 2021.
• Inclusion criteria: pediatric patients who were given clonazepam for preventing breakthrough seizures during acute illness, patients presenting with an increase in seizure frequency that is likely due to their acute illness. 97 patients met criteria to be included in the study.
• Exclusion criteria: clonazepam for any other indication.
• Statistical Analysis: Data was evaluated using descriptive statistics.

Results

• 91.7% of patients treated with clonazepam for febrile seizures did not have any further seizures after beginning therapy.
• 93.8% of patients were able to begin therapy within 24 hours of discharge, only 6% of patients had insurance or stocking issues at their chosen pharmacy.
• 82.5% of patients were also prescribed rectal diazepam at discharge or had a previous prescription for it.

Discussion

• Limitations of this continuation include lack of follow-up to determine accessibility or efficacy.

Conclusion

• Based on this data, clonazepam can be utilized to reduce seizure frequency for patients with febrile seizures with very little delays in therapy related to insurance or availability.