



Beneath the Seizures: A Closer look at Epilepsy's Demographic and Clinical Landscape in India- The REMAP study (Abstract Id: 813)

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- **Aims:** Epilepsy, a chronic neurological disorder, poses a significant burden globally—especially in low- and middle-income countries like India, where challenges such as underdiagnosis, limited health care access, poor treatment adherence, and social stigma persist. This study explores the demographic, clinical, and treatment profiles, along with comorbidities, in a large Indian epilepsy cohort
- **Methodology:** A retrospective, multicenter, cross-sectional study was conducted across hospitals, clinics, and healthcare institutions throughout India. Data were collected on demographics (age, gender, BMI), diagnostic variables (seizure type, age at onset, family history), lifestyle factors (smoking), treatment patterns (antiepileptic drug [AED] monotherapy or polytherapy), and comorbidities. Statistical analysis was performed using SPSS software, with a significance threshold of $p < 0.05$.

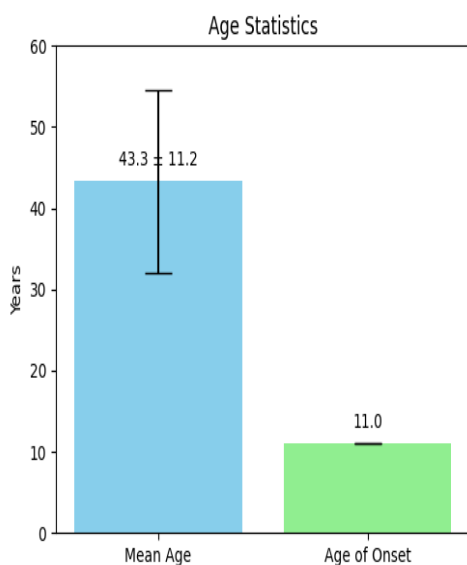


Under the aegis of Department of Neurology
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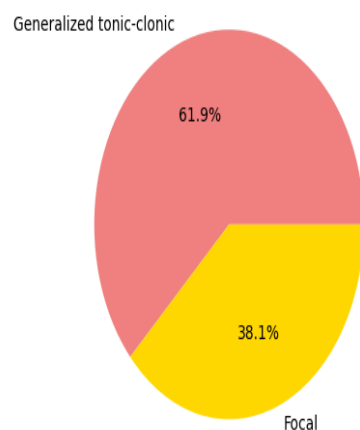


- Results:** The study analyzed 9,201 patients aged 18–80 years (mean age 43.3 ± 11.2 years). The mean age of epilepsy onset was 11 years, indicating early manifestation. Generalized tonic-clonic seizures were the most prevalent (61.9%), followed by focal seizures (38.1%). A positive family history was observed in 20% of cases. Comorbid psychiatric conditions were prominent, with depression reported in 34% of patients, followed by sleep disturbances (11.5%) and psychotic disorders (8.5%). Levetiracetam was the most frequently prescribed AED, with 78.9% of patients managed on monotherapy

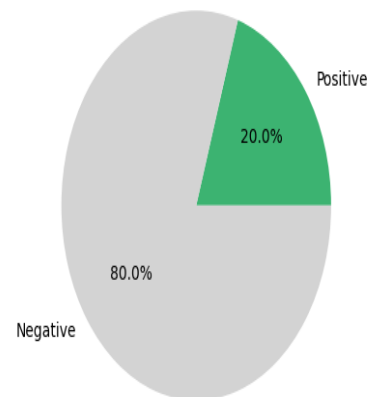
Epilepsy Patient Summary Statistics



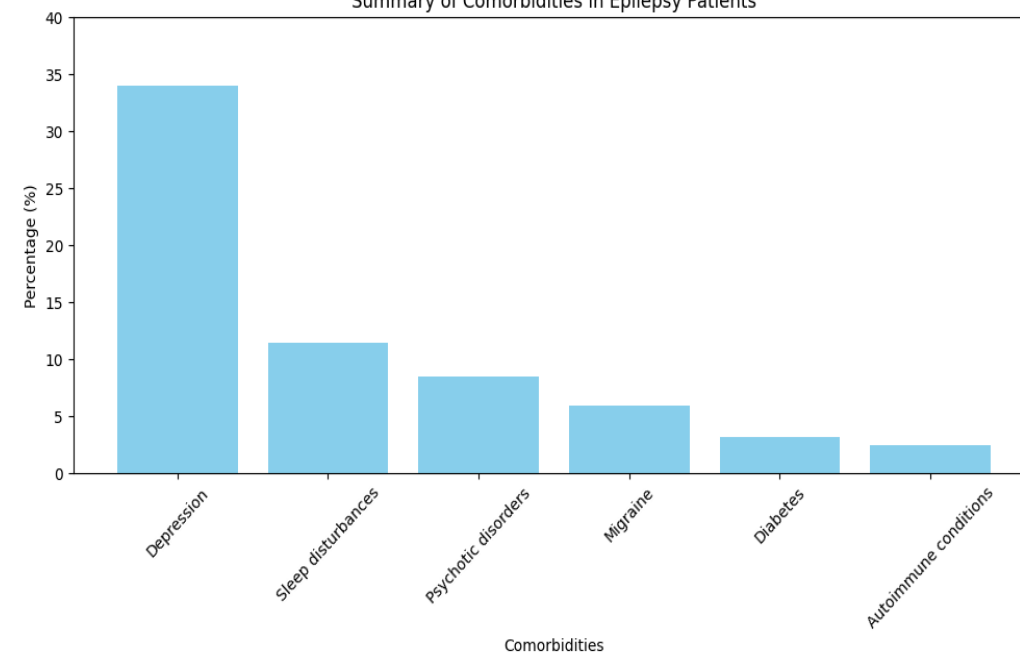
Type of Epilepsy Diagnosed



Family History of Epilepsy



Summary of Comorbidities in Epilepsy Patients





Discussion:

- Early onset (mean 11 years) highlights need for timely diagnosis and intervention.
- Generalized tonic-clonic seizures predominate, demanding effective seizure management strategies.
- High psychiatric comorbidity burden—especially depression (34%)—warrants integrated neuropsychiatric care
- Levetiracetam monotherapy use dominate, reflecting current safe and practical prescribing patterns

Conclusion: This large-scale analysis offers valuable insights into the Indian epilepsy population, highlighting early-onset disease, the predominance of generalized seizures, and a substantial burden of psychiatric comorbidities—particularly depression. These findings emphasize the urgent need for improved diagnostic pathways, equitable treatment access, and integrated neuropsychiatric care to address the multifaceted needs of epilepsy patients in India.