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Research Article

**DEPRESSION AND RELEVANT EFFECT OF ANTI EPILEPTIC
MEDICATION IN EPILEPTIC PATIENTS****Anum Shehzadi, Abdullah Khan, Kainat Sana**
Mayo Hospital, Lahore**Abstract:**

Objective: The research purpose was to determine the association of depression with the age factor as well as drug intake in the condition of epilepsy.

Material and methods: The design of our research was cross-sectional, carried out at Allied Hospital Faisalabad in the duration form Feb 2017 to Aug 2018. The objective of the research was to analyze despondence state in epilepsy condition.

Results: The number of epileptic cases enrolled for our research was just one hundred among them the numbers of men cases were sixty-four (sixty-four percent) along with thirty-six (thirty-six percent) women cases. The percentage of men and women who are in marital status were forty-seven and fifty-five percent respectively. The age of entire epilepsy cases (one hundred) of our cross-sectional study was in between twenty-five to thirty-five years. In our research, fifty-nine percent of the cases are those who were already taking the medicines of antiepileptic. Almost sixty-five percent of the patients were epileptically sound from the previous 1 month.

Conclusion: The condition of depression is most usual in entire epileptic cases. If depression diagnosing is not well in time it could greatly influence the quality of sufferer life. As impressive therapy is applicable, there is a requirement for scrutiny of depression in epilepsy cases on a daily basis

Keywords: Anti-depressant, Medication, Psychiatric disorders, Hamilton Rating Scale.

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INTRODUCTION:

Approximately thirty to fifty percent of epileptic cases have clinical despondency/mournfulness. Occurrences of calculated self-impairment along with suicide attempt is considered as 5 times greater in epileptic cases as compared to the common public. The most sensitive cases considered for suicide attempt are Temporal lobe epilepsy cases. Temporal lobe epilepsy in cases of children is also a severe neurological state, seems to be most strengthen relation with self-killing attitude. Depression is diagnosis as the significant most cause to curtail life standards as compared to epilepsy lone. Unluckily the recognition of depression is constantly pending as a most important cause of epilepsy, conduction of depression treatment in huge epilepsy cases is still pending so that depression did not take any importance in complete epilepsy treatment. The objective of Limited research conduction is to find out the expansion of epilepsy cases in Pakistan. In most of the cases the recognition of depression is constantly absent as well as researchers do not give any importance to entire epilepsy treatment resulting in degrading life quality of victims. All epilepsy cases have huge despondency/mournfulness with respect to other common public and research asses the occurrence domain in between twenty and fifty-four percent.

MATERIAL AND METHODS:

The design of our research was cross-sectional, carried out at Allied Hospital Faisalabad in the duration form Feb 2017 to Aug 2018. Analysis of depression in epilepsy condition is the research main objective. Researcher registered all those cases who presented while the research interval and also take written approval for said research from the guardians of all cases. All cases of neurological treatment along with those who were mentally sick other than depressed cases are not included in our research. Uniformly researcher expelled out all such cases who have any medical issue other than depression from research. Entire epileptic cases enrolled for our research were just one hundred. The researcher collected statistical data of all the patients such as gender information, age, education as well as married or unmarried and kind of seizure. With the objective of assessing depression, Hamilton rating scale is avail. c. Different kinds of depressions are mild, moderate, severe and extremely severe. Researcher evaluates all these forms in term of its periodicity.

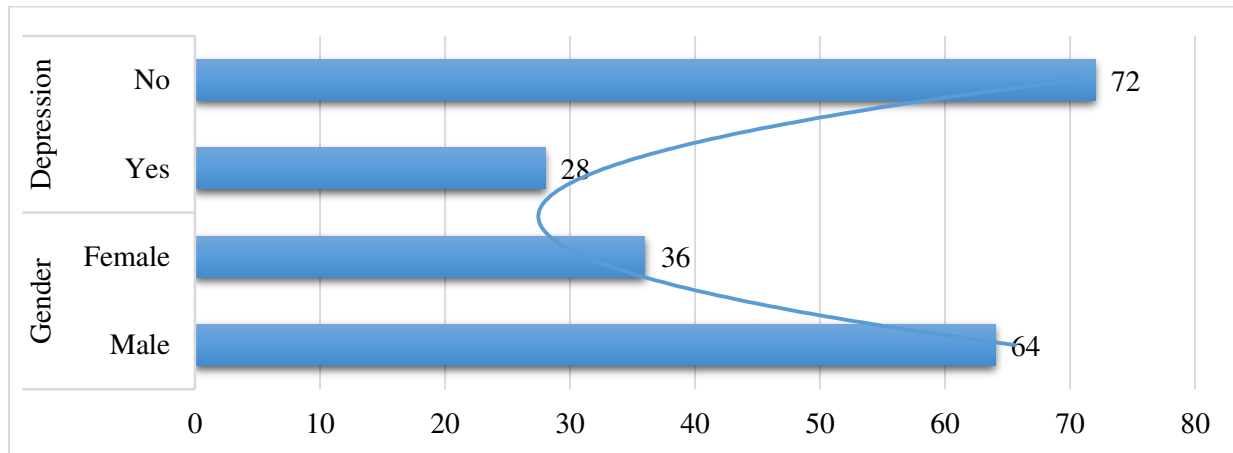
RESULTS:

The number of epileptic cases enrolled for our research was just one hundred the numbers of men cases were sixty-four (sixty-four percent) along with thirty-six (thirty-six percent) women cases. The percentage of men and women who were in marital status were forty-seven and fifty-five percent respectively. The age of entire epilepsy cases (one hundred) of our cross-sectional study was in between twenty-five to thirty-five years. In our research, fifty-nine percent of the cases are those who were already taking the medicines of antiepileptic and almost sixty-five percent of the patients were epileptically sound from the previous 1 month.

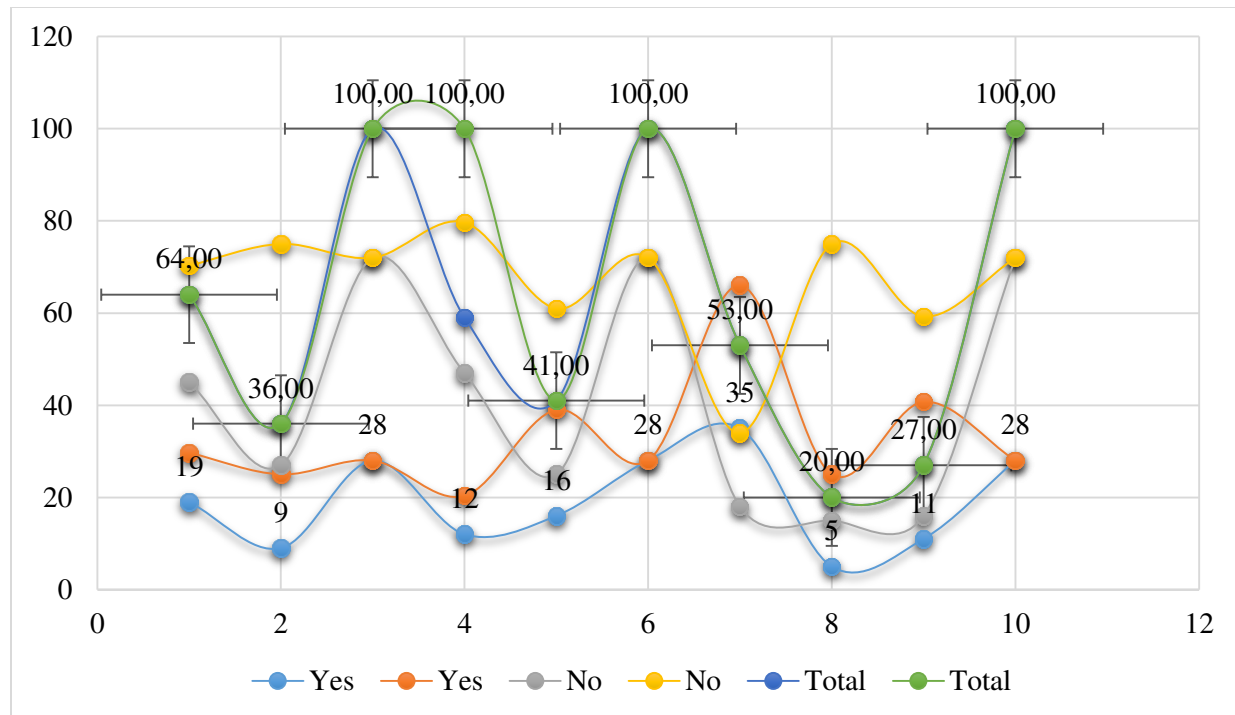
Out of total one hundred study cases, identified depressed patients was twenty-eight. Among twenty-eight depression cases, the number of men and women were nineteen and nine cases respectively. Therefore, the percentage of depression cases in women were twenty-five percent as well as men depression cases were (29.68 percent) in epilepsy victims. The most affected peoples with depression are having age between eighteen to thirty-five years. According to the Hamilton rating scale for mournfulness, a division of depression is of four types named as mild, moderate, severe and very severe depression. The number of cases diagnosed with severe as well as very severe depression was (2) & (1) respectively. Entire three patients who were severe and very severe depression patients were men and they are also not using any antibiotic medicine for epileptic and were epileptically sound from the previous 1 month. Leftover all the cases were mild and moderate depression victims. In our research, we also concluded that the depression percentage is much greater in those cases who are not using any antibiotic medicine for epileptic as compared to those cases who are using antibiotic medicine for an epileptic. The number of patients who were taking along with those who were not taking any antibiotic medicine for epileptic was sixteen (27.1 percent) and twelve (29.26 percent) respectively. However, variation was not statically important. The chi-square test for association presented that epilepsy was not importantly linked with despondency. Moreover, important variation did not diagnose in the degree of despondency among those cases who are married as well as unmarried. Important variation did not diagnose in the level of education along with the level of despondency and nil victim was taking antidepressant drugs.

Table – I: Gender and Depression Distribution

Gender / Depression		Number
Gender	Male	64
	Female	36
Depression	Yes	28
	No	72

**Table – II:** Gender, Medicine intake and Age Stratification

Gender / Medicine Intake / Age		Yes		No		Total		P-Value
		No	%	No	%	No	%	
Gender	Male	19	29.69	45	70.31	64	64.00	0.6511
	Female	9	25.00	27	75.00	36	36.00	
	Total	28	28.00	72	72.00	100	100.00	
Medicine Intake	Yes	12	20.34	47	79.66	59	100.00	0.0456
	No	16	39.02	25	60.98	41	41.00	
	Total	28	28.00	72	72.00	100	100.00	
Age (Years)	18 - 35	35	66.04	18	33.96	53	53.00	0.003
	36 - 50	5	25.00	15	75.00	20	20.00	
	51 - 65	11	40.74	16	59.26	27	27.00	
	Total	28	28.00	72	72.00	100	100.00	



DISCUSSION:

Our research concluded that regularity of despondency in epilepsy cases was twenty-eight percent which is closer to earlier researches. Even its comparatively huge expansion, nil victim was taking antidepressant drugs. The main cause of this aspect is that sufferer in our community do not give any importance to such disease and also not feel that they required to present their indication of despondency in front of the doctor as well as doctors also not give the depression any importance and do not ask any question about this or to manage it in epileptic cases. The peoples having age eighteen to thirty-five years was mostly affected by depression accounting for twelve (42.8 percent) among twenty-eight despondency cases. This is congruent with Nigerian research and the main cause could be job exploration, life partner complication with this age category. They are also facing a lot of social issues in this particular attempt because of epilepsy. An additional outcome of our research is that the depression percentage is much greater in those cases who are not using any antibiotic medicine for epileptic as compared to those cases who are using antibiotic medicine for an epileptic. Our derivation is that antibiotic medicines such as carbamazepine as well as valproate etc. are too behaviour stabilizer and this variation is because of medical effects. Among epilepsy cases, causes connected to seizure, just like seizure forms, periodicity of seizure, sickness time period, either the sickness is overcome or not, the frequency of drugs

utilize, other mental complications as well as more mental causes associated to the advancement of psychopathology. We cannot analyze these causes in association with the advancement of despondence in epileptic cases. This research has presented that a lot of epileptic cases can have despondence too. Despondence is a manageable state and results of management can give the victim a quality life.

CONCLUSION:

The condition of depression is most usual in entire epileptic cases. If depression diagnosing is not well in time it could greatly influence the quality of sufferer life. As impressive therapy is applicable, there is a requirement for scrutiny of depression in epilepsy cases on a daily basis

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