Residents living with seizures may benefit from a more specific diagnosis

There is a type of epilepsy that is often overlooked, but you can help change that

Steven, at age 32 | Resident of a long-term care facility living with LGS

Meet Steven

Steven had his first seizure before he was 1 year old. Throughout his life he missed critical developmental milestones and was prescribed many different antiseizure medications, but continued to experience seizures. He didn't receive a diagnosis of Lennox-Gastaut syndrome (LGS) until 25 years later.

Noticing these signs may help you recognize LGS in someone like Steven:

- Persistent seizures[1]
- Impaired motor function and difficulty walking without assistance[2]
- Trouble concentrating and learning new things, or may not engage with others[2]
- Hyperactivity, autistic traits, and even aggression[2]

After receiving a specific LGS diagnosis, Steven was prescribed EPIDIOLEX. Today, Steven has fewer seizures, participates in more activities, and enjoys some independence.

REST LGS

The Refractory Epilepsy Screening Tool for LGS (REST-LGS) was developed by a panel of experts to help lead diagnosis for these patients.[1]

INDICATIONS:

EPIDIOLEX (cannabidiol) oral solution is indicated for the treatment of seizures associated with Lennox-Gastaut syndrome (LGS), Dravet syndrome (DS), or tuberous sclerosis complex (TSC) in patients 1 year of age and older.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATION: HYPERSENSITIVITY

EPIDIOLEX (cannabidiol) oral solution is contraindicated in patients with a history of hypersensitivity to cannabidiol or any ingredients in the product.

Please see continued Important Safety Information on back and full Prescribing Information.

Epidiolex® (cannabidiol)

Identifying different seizure types can help you recognize LGS

- **Tonic-clonic:** Muscles extend and become rigid, and then jerk rhythmically on both sides of the body[3,4]
- **Atonic:** A sudden loss of muscle strength, where their body goes limp[5]
- **Atypical absence:** Prolonged periods of staring, accompanied with blinking, chewing, or smacking lips[6]
- **Clonic:** Repeated jerking movements lasting a few seconds to a minute that cannot be stopped by restraining or repositioning the arms or legs[7]

These types of seizures can result in a loss of consciousness or cause a sudden fall. If severe enough, these seizures may require the administration of rescue medications or a trip to the emergency room.[3,5]

Alert those responsible for making treatment decisions if you recognize signs of LGS.
A more specific diagnosis can lead to different treatment options and better outcomes.

IMPORTANT SAFETY INFORMATION (CONT'D)

WARNINGS & PRECAUTIONS

Hepatocellular Injury:
EPIDIOLEX can cause dose-related transaminase elevations. Concomitant use of valproate and elevated transaminase levels at baseline increase this risk. Transaminase and bilirubin levels should be obtained prior to starting treatment, at one, three, and six months after initiation of treatment, and periodically thereafter, or as clinically indicated. Resolution of transaminase elevations occurred with discontinuation of EPIDIOLEX, reduction of EPIDIOLEX and/or concomitant valproate, or without dose reduction. For patients with elevated transaminase levels, consider dose reduction or discontinuation of EPIDIOLEX or concomitant medications known to affect the liver (e.g., valproate or clobazam). Dose adjustment and slower dose titration is recommended in patients with moderate or severe hepatic impairment. Consider not initiating EPIDIOLEX in patients with evidence of significant liver injury.

Somnolence and Sedation:
EPIDIOLEX can cause somnolence and sedation that generally occurs early in treatment and may diminish over time; these effects occur more commonly in patients using clobazam and may be potentiated by other CNS depressants.

Suicidal Behavior and Ideation:
Antiepileptic drugs (AEDs), including EPIDIOLEX, increase the risk of suicidal thoughts or behavior. Inform patients, caregivers, and families of the risk and advise to monitor and report any signs of depression, suicidal thoughts or behavior, or unusual changes in mood or behavior. If these symptoms occur, consider if they are related to the AED or the underlying illness.

Withdrawal of Antiepileptic Drugs:
As with most AEDs, EPIDIOLEX should generally be withdrawn gradually because of the risk of increased seizure frequency and status epilepticus.

ADVERSE REACTIONS:

The most common adverse reactions in patients receiving EPIDIOLEX (≥10% and greater than placebo) include transaminase elevations; somnolence; decreased appetite; diarrhea; pyrexia; vomiting; fatigue, malaise, and asthenia; rash; insomnia, sleep disorder and poor-quality sleep; and infections. Hematologic abnormalities were also observed.

PREGNANCY:

EPIDIOLEX should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus. Encourage women who are taking EPIDIOLEX during pregnancy to enroll in the North American Antiepileptic Drug (NAAED) Pregnancy Registry.

DRUG INTERACTIONS:

Strong inducers of CYP3A4 and CYP2C19 may affect EPIDIOLEX exposure. EPIDIOLEX may affect exposure to CYP2C19 substrates (e.g., clobazam, diazepam, stiripentol), orally administered P-gp substrates, or other substrates (see full Prescribing Information). Consider dose reduction of orally administered everolimus, with appropriate therapeutic drug monitoring, when everolimus is combined with EPIDIOLEX. A lower starting dose of everolimus is recommended when added to EPIDIOLEX therapy. Concomitant use of EPIDIOLEX and valproate increases the incidence of liver enzyme elevations. Pneumonia was observed more frequently with concomitant use of EPIDIOLEX and clobazam. Dosage adjustment of EPIDIOLEX or other concomitant medications may be necessary.

INDICATIONS:

EPIDIOLEX (cannabidiol) oral solution is indicated for the treatment of seizures associated with Lennox-Gastaut syndrome (LGS), Dravet syndrome (DS), or tuberous sclerosis complex (TSC) in patients 1 year of age and older.

Please refer to the EPIDIOLEX full Prescribing Information for additional important information.

References: 1. Piña-Garza JE, Boyce D, Tworek DM, et al. *Epilepsy Behav.* 2019;90:148-153. **2.** Kerr M, Kluger G, Philip S. *Epileptic Disord.* 2011;13(suppl 1):S15-S26. **3.** Kiriakopoulos E, Shafer PO. Tonic-clonic seizures. Epilepsy Foundation. March 15, 2017. Accessed September 18, 2023. https://www.epilepsy.com/what-is-epilepsy/seizure-types/tonic-clonic-seizures **4.** Epilepsy/seizure disorders. Tuberous Sclerosis Alliance. Updated August 2016. Accessed September 18, 2023. www.tscalliance.org/about-tsc/signs-and-symptoms-of-tsc/brain-and-neurological-function/epilepsy-and-seizure-disorders/ **5.** Kiriakopoulos E. Atonic seizures. Epilepsy Foundation. Accessed September 18, 2023. www.epilepsy.com/what-is-epilepsy/seizure-types/atonic-seizures **6.** Kiriakopoulos E. Atypical absence seizures. Epilepsy Foundation. Accessed September 18, 2023. www.epilepsy.com/what-is-epilepsy/seizure-types/atypical-absence-seizures **7.** Kiriakopoulos E. Clonic seizures. Epilepsy Foundation. Accessed September 18, 2023. https://www.epilepsy.com/what-is-epilepsy/seizure-types/clonic-seizures

Jazz Pharmaceuticals

Epidiolex® (cannabidiol)