

Epilepsy Scotland Factsheet Foetal Anti-Convulsant Syndrome (FACS)

Some babies can develop Foetal Anti-Convulsant Syndrome (FACS) if they were exposed to certain anti-epileptic drugs (AEDs) while in the womb. This can happen because during the first three months (first trimester) of pregnancy, the baby's main organs develop. Taking some AEDs that cross the placenta during this time may risk the development of FACS.

It is important to remember that most women with epilepsy will have a healthy child. **If you are already pregnant and are worried about your AEDs do not stop taking your medication.** Stopping your medication will make it more likely that you will have a seizure and this is also be a risk for your baby. Talk this over with your GP, consultant, obstetrician or epilepsy specialist nurse.

What is FACS?

FACS can cause physical as well as developmental, behavioural and learning difficulties. Some of the symptoms that are thought to be associated with FACS are shown below. Children with FACS can have a mixture of mild to severe symptoms. Some physical symptoms can often be treated.

Physical	Other
Low birth weight	Developmental delay
Abnormalities in toes and fingers including small or absent nails	Speech and language problems
Hyperextendible (loose) joints	Autistic spectrum and associated disorders (like ADHD, Aspergers, Hyperactivity, Dyspraxia)
Distinctive facial features affecting nasal bridge, eyes and forehead	Poor fine and gross motor control
Cleft lip	
Inguinal (groin area) hernias	
Genital malformations	
Hearing and vision problems	
Spina bifida	
Kidney and heart malformations	
Bowel problems	
Cerebral palsy	

Which AEDs carry the highest risk of FACS?

It is thought that the AEDs that are most associated with FACS are the older drugs like Sodium Valproate (Epilim), Phenytoin, Carbamazepine and Phenobarbital but also the newer drugs Topiramate and Lamotrigine. There are fewer reports investigating the impact of other newer AEDs but research into this has started.

What should I do if I am planning to become pregnant?

Ideally if you have epilepsy and take any AEDs you should plan your pregnancy. Pre-conceptual counselling is an important part of this. It gives your consultant a chance to review the medication you are on before pregnancy and labour. Together with your doctor or epilepsy specialist nurse you can decide on the best way to lower any risks to you and your baby. The risk of your unborn child being affected is small if you only take one drug but becomes higher if you are taking more than one drug or if you are on a high dose of a drug. It is best if you can take a low dose of one drug to stop your seizures. Your doctor may suggest that you switch to a different drug that is safer in pregnancy or that you slowly come off your medication before trying for a baby. **Do not do this without your doctor's advice.**

Where can I go for more help and advice?

If you are pregnant or planning a pregnancy and are concerned about the risk of FACS contact **your consultant, ESN or GP** for help and advice. They will be able to talk to you about your individual situation. You can also read our **Preconceptual Care Factsheet** and get in touch with:

- **The UK Epilepsy & Pregnancy Register: 0800 389 1248** who have trained staff available to answer your questions.
- **The Organisation for Anti-Convulsant Syndrome (OACS):** 01253 790 022 www.oacs-uk.co.uk that has been set up by parents of children affected by FACS.

For more help and advice call our helpline 0808 800 2200

Text 07786 209 501

Or email us at enquiries@epilepsyscotland.org.uk