



Mapping the first-choice hormonal therapy for infantile epileptic spasms syndrome in South Asia: A network meta-analysis

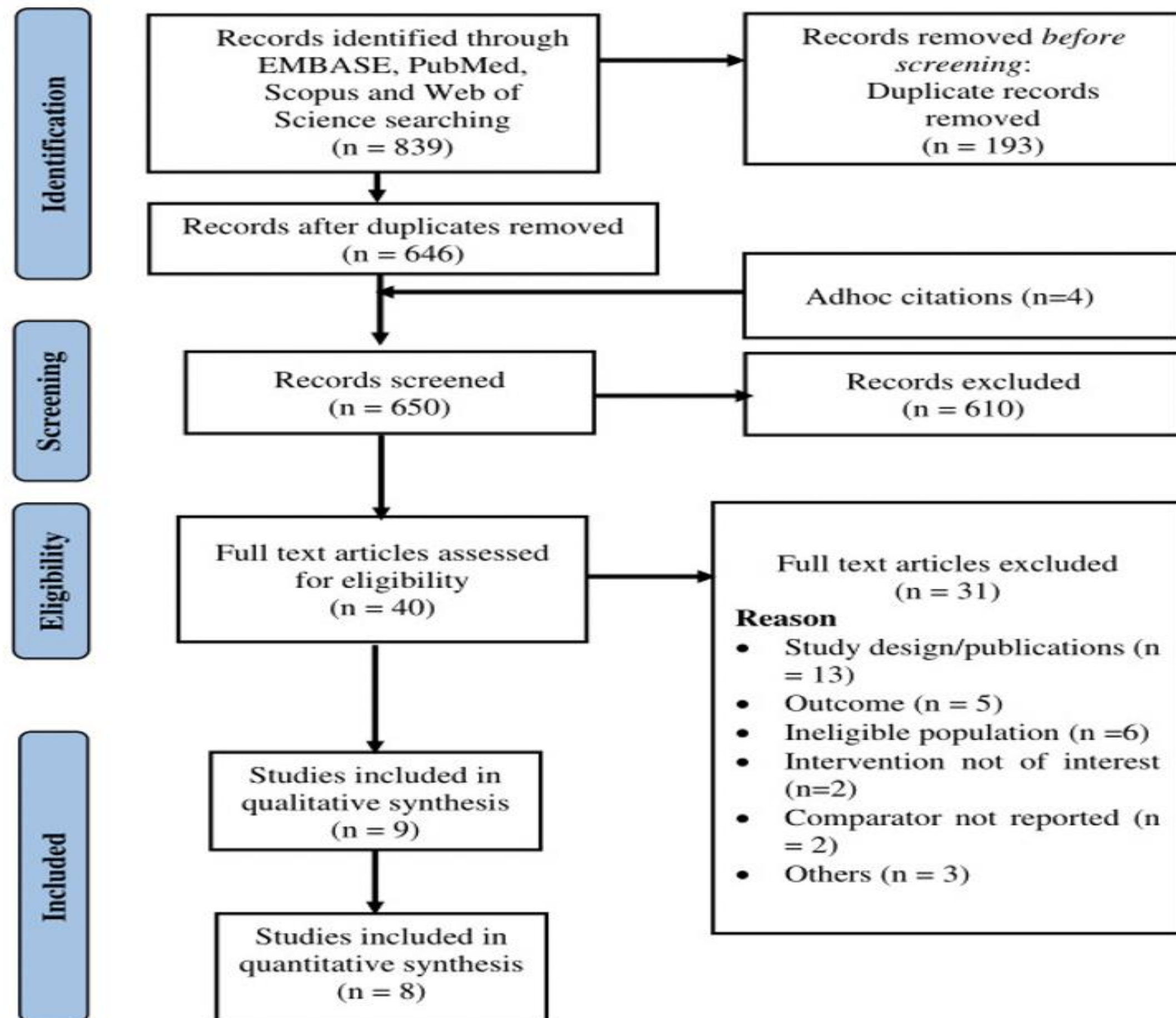
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BACKGROUND

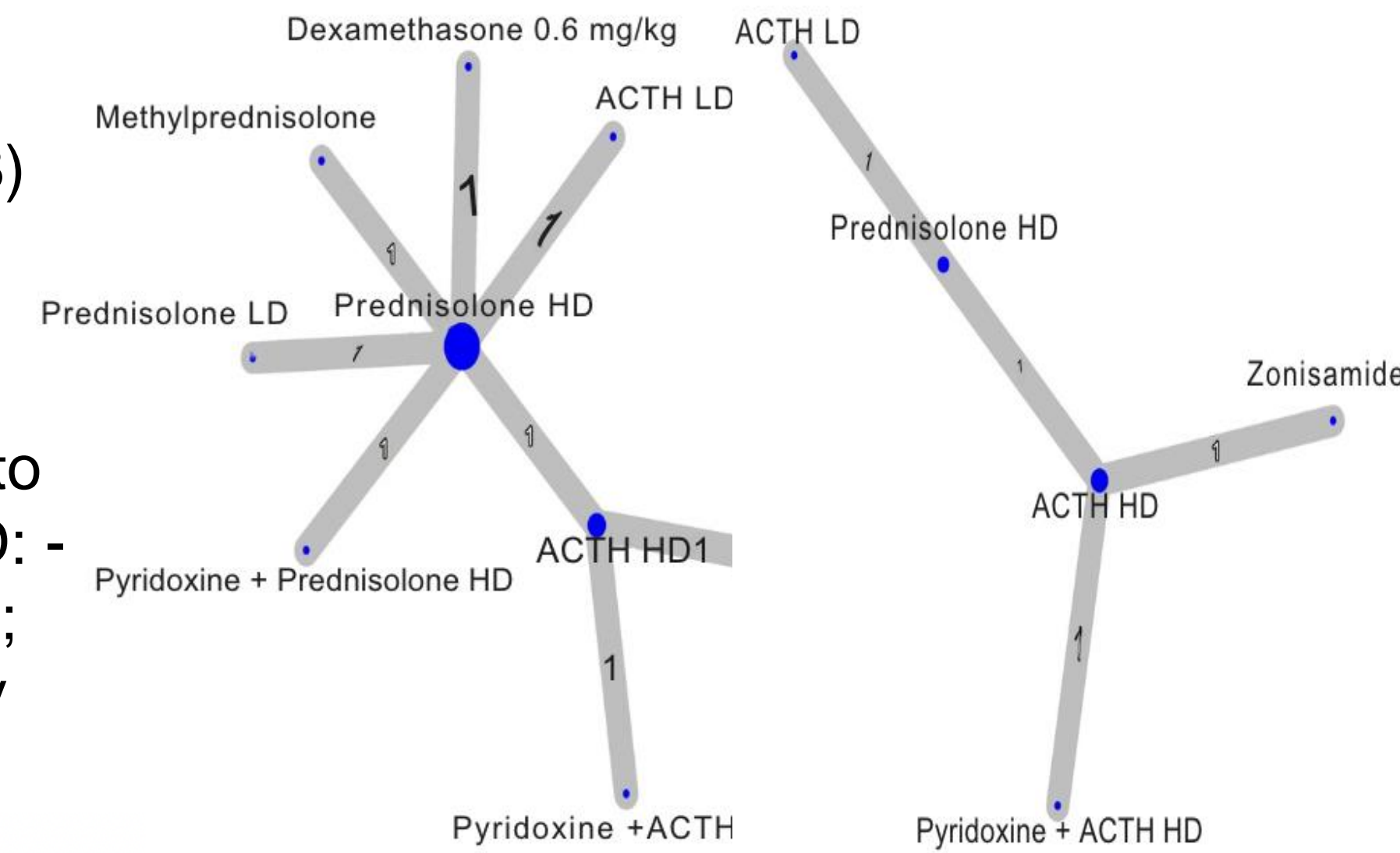
- Infantile epileptic spasms syndrome (IESS), the most common cause of epilepsy of infantile onset, is characterized by epileptic spasms (ES) and hypsarrhythmia on EEG.
- There is a conflict of literature with regards to first choice hormonal therapy in South East Asia.

MATERIALS & METHODS

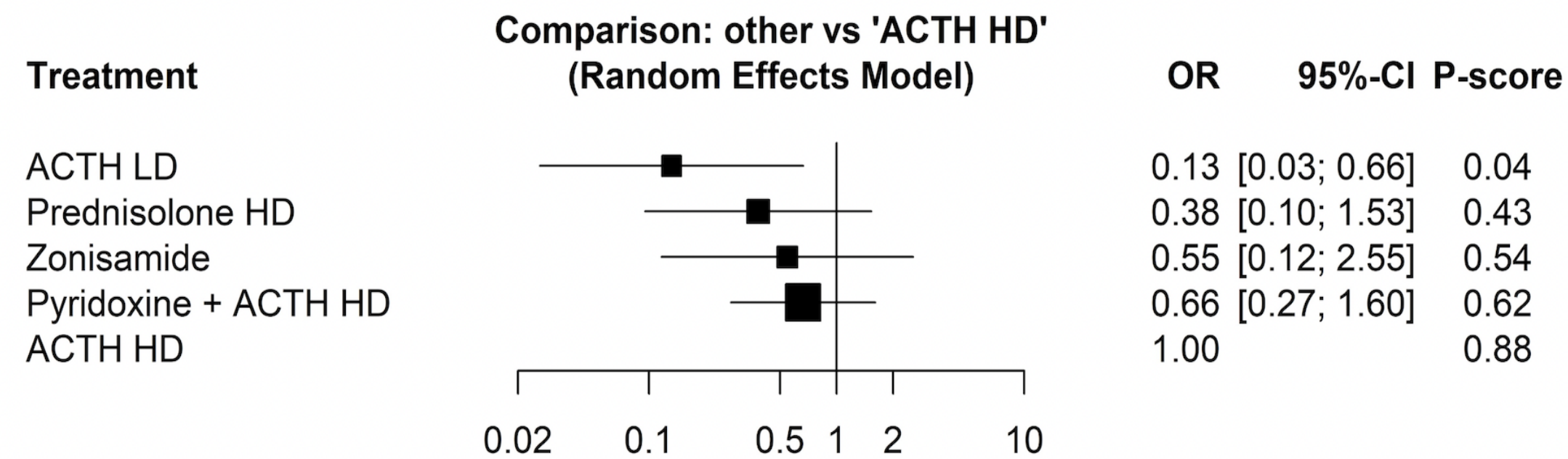


RESULTS

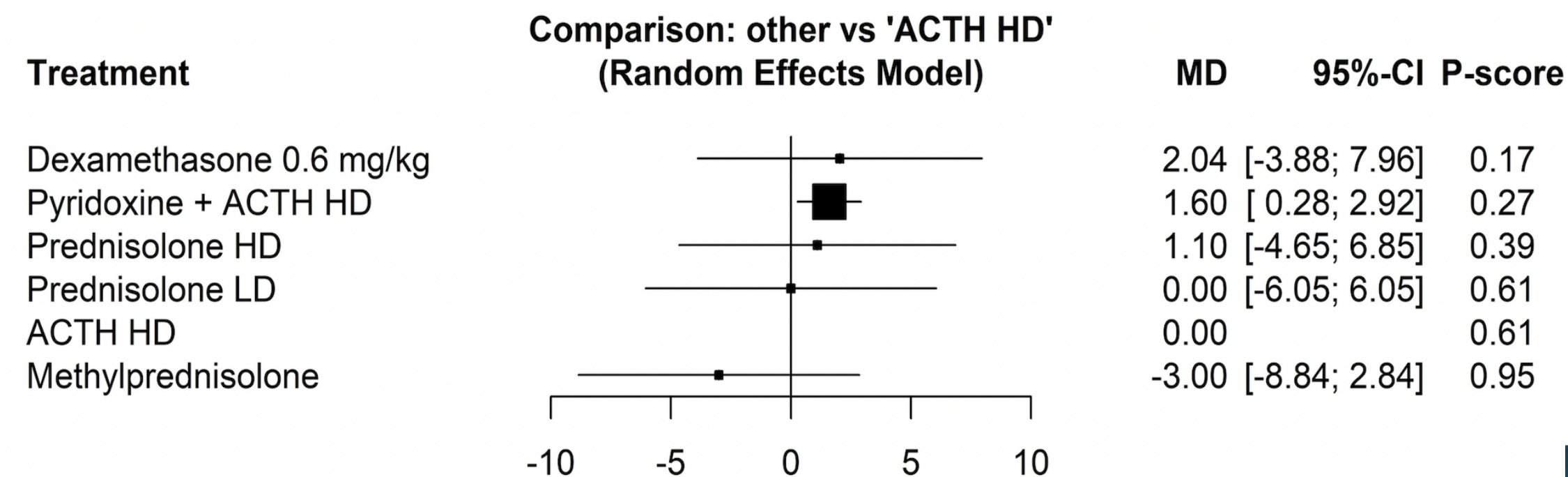
- ACTH HD (OR: 7.60; 95%CI: 1.51, 38.17; p-score: 0.88) and prednisolone HD (OR: 2.90; 95%CI: 1.27, 6.63; p-score: 0.43) has greater efficacy at six weeks as compared with ACTH LD (low dose).
- Methylprednisolone has taken negative MD time taken to be spasms free as compared with prednisolone LD (MD: -3.00; 95%CI: -5.10, -0.90), prednisolone HD (MD: -4.10; 95%CI: -5.10, -3.10) and dexamethasone 0.6mg/kg/day (MD: -5.04; 95%CI: -6.74, -3.34).



b. Complete cessation of spasms after six-weeks treatment



b. Time taken for cessation of spasms



CONCLUSIONS

Our network meta-analysis presents the highest quality evidence for the preferred first-choice hormonal therapy in managing Infantile Epileptic Spasms Syndrome (IESS) in South Asia, identifying ACTH HD at six weeks as the top-ranking treatment for the cessation of spasms. Additionally, Methylprednisolone is shown to achieve the quickest cessation of spasms with the least amount of time taken.