

# Searching for answers

The malformations and long-term harms that affect children exposed in utero to *valproic acid* came to the attention of health professionals gradually and after many years of use: malformations in the 1980s, and neurological and behavioural effects in the 2000s. It took a long time for these harms to be taken into account, and the women concerned were often inadequately informed. The facts were brought to public attention in France in 2015 by the Dépakine<sup>o</sup> scandal (a).

For women with epilepsy who might become pregnant, are the other antiepileptics any safer for the unborn child? Are there any antiepileptics that pose no danger to the unborn child and that prevent epileptic seizures in the mother without exposing her to significant dangers?

What answers can healthcare professionals give to a woman or her partner who legitimately asks: "With this antiepileptic, will my child be autistic or have behavioural problems? Is this treatment really necessary? If so, I want to know more about the long-term effects, so that I can make an informed decision about whether or not to have a child."

These perfectly valid questions can no longer be met with fatalism. All of the available data must be analysed without delay and made public.

Many uncertainties persist, and not only around antiepileptics. The same questions apply in particular to all psychotropic medications (antidepressants, neuroleptics, drugs with antimuscarinic effects, etc.), as well as endocrine-disrupting drugs. For the parents' sake and that of their children, epidemiologists need to advance scientific knowledge concerning the long-term effects of all such drugs that expose children to poorly elucidated harms.

Most often, one only finds what one is searching for. There is a pressing need to fund these epidemiological studies and to conduct regular information campaigns to promote the intelligent use of drugs, including in the special case of pregnant women and their unborn children.

Health professionals urgently need to take the time to carefully weigh the advantages, disadvantages and risks of all possible options, and to discuss them with patients. Because certain harms, when they affect children exposed to the drug in utero, are radically and permanently life-changing for the families involved.

## Prescrire

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**a-** Refers to the actions of the French whistleblower, Marine Martin (Prix Prescrire 2017), which led to a number of measures to prevent in utero exposure to teratogenic drugs at the European level. This woman discovered in 2009, through her own research, that her 7-year old son's developmental disorder was in fact due to valproic acid (Dépakine<sup>o</sup>), a medicine that she had been taking since childhood and during her pregnancies without being warned of its harms (refs 1,2).

**Sources** 1- Prescrire Editorial Staff "Valproic acid and its derivatives: pregnancy prevention measures stepped up in the EU" *Prescrire Int* 2018; **27** (199): 293-294. 2- Prescrire Editorial Staff "Prix Prescrire 2017: The Dépakine (valproic acid) scandal. I could not remain silent" *Prescrire Int* 2017; **26** (186): 252.