

Freedom of Information Questionnaire – Epilepsy in Pregnancy Services

Hospital Name: Milton Keynes University Hospital

Trust: Milton Keynes University Hospital

Maternity Medicine Network: Thames Valley

Secondary/Tertiary Care: Oxford

Pre-pregnancy planning in women with epilepsy		
1a	Do women with epilepsy have access to a pre-pregnancy counselling clinic in your centre?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1b	If pre-pregnancy counselling is available in your centre, who delivers this/these services? (Please tick all that apply)	<input type="checkbox"/> A neurologist/ epilepsy specialist doctor <input type="checkbox"/> A neurology specialist nurse/ epilepsy specialty nurse <input checked="" type="checkbox"/> An obstetrician with an interest in neurology/ a maternal-fetal medicine obstetrician <input type="checkbox"/> An obstetrician physician <input type="checkbox"/> An epilepsy specialist midwife
1c	If you have selected more than one practitioner in question 1b do they work separately or as part of a joint clinic?	<input type="checkbox"/> They work separately <input type="checkbox"/> They work together in a joint clinic
1d	How are patients transferred into the pre-pregnancy clinic? (Please tick all that apply)	<input checked="" type="checkbox"/> From their General Practitioner (GP) <input type="checkbox"/> From their secondary care epilepsy service <input type="checkbox"/> Other – please state:

Antenatal management		
2	Do your patients have access to written information on the management of epilepsy in pregnancy?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No From pregnancy notes during their antenatal clinic appointment
3a	Do women with epilepsy in your centre have access to regular planned antenatal care with a designated epilepsy care team?	<input checked="" type="checkbox"/> Yes Women have access through maternal medicine clinics. The epilepsy team do not routinely provide antenatal care, however will review if needed.

		<input type="checkbox"/>
3b	<p>If yes, which of the following healthcare professionals deliver the service?</p> <p>(Please tick all that apply)</p>	<input type="checkbox"/> A neurologist/ epilepsy specialist doctor <input type="checkbox"/> A neurology specialist nurse/ epilepsy specialist nurse <input checked="" type="checkbox"/> An obstetrician with an interest in neurology/ a maternal-fetal medicine obstetrician <input type="checkbox"/> An obstetric physician <input type="checkbox"/> An epilepsy specialist midwife
3c	<p>If you have selected more than one practitioner in questions 3b do they work separately or as part of a joint clinic?</p>	<input type="checkbox"/> They work separately <input type="checkbox"/> They work together in a joint clinic
3d	<p>How do women with epilepsy enter the service?</p> <p>(Please tick all that apply)</p>	<input checked="" type="checkbox"/> Identified at their booking appointment <input type="checkbox"/> From their General Practitioner (GP) <input type="checkbox"/> From their secondary care epilepsy service <input type="checkbox"/> Other – please state:
3e	<p>If yes, how often are they reviewed in your epilepsy pregnancy clinic?</p>	<input type="checkbox"/> Fortnight <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Bimonthly <input type="checkbox"/> Once per trimester <input checked="" type="checkbox"/> Other – please state: Individual basis depending on obstetric and medical history
4	<p>Are women with epilepsy risk stratified in your antenatal service?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4b	<p>If yes, how is the risk assessment done?</p>	<input type="checkbox"/> Using a risk stratification tool : please state which <input checked="" type="checkbox"/> Other – please state: Medical history
4c	<p>If so do those women considered 'higher risk' have a different care</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

	pathway to those considered 'lower risk'	If yes, please detail how these pathways differ: They are seen more regularly. No formal pathway in place, this decision is made by obstetrician
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Medication management		
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5	How does your service manage folic acid use in women with epilepsy?	<input checked="" type="checkbox"/> Recommend 5mg folic acid for three months prior to pregnancy and throughout pregnancy <input type="checkbox"/> Recommend 5mg folic acid for three months prior to pregnancy and for the first trimester of pregnancy, then drop to 400mcg for the remainder of the pregnancy <input type="checkbox"/> Recommend 400mcg for three months prior to pregnancy and for the first trimester of pregnancy <input type="checkbox"/> Recommend 400mcg for three months prior to pregnancy and throughout pregnancy <input type="checkbox"/> Other – please state
6	How does your service manage titration of antiseizure medications in pregnancy? (Please tick all that apply)	<input type="checkbox"/> Using drug levels <input type="checkbox"/> Using clinical symptoms <input checked="" type="checkbox"/> Using both drugs levels and clinical symptoms <input type="checkbox"/> Other – please state:
7	Does your centre routinely measure drug levels in women with epilepsy?	<input checked="" type="checkbox"/> No
8a	Do you use long-acting benzodiazepines, such as clobazam, in the peripartum period for women with 'high risk' of seizures during this period?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8b	If yes, what is your routine drug/dose/regimen	Clozabam 10mg 3 days
8c	If yes, what are the criteria for women being considered 'high risk'?	Seizures during pregnancy

Postpartum follow up for women with epilepsy		
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9		<input type="checkbox"/> In a postpartum pregnancy clinic
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	How are women with epilepsy in your service followed up postpartum?	<input checked="" type="checkbox"/> In their usual epilepsy clinic <input type="checkbox"/> By their GP <input type="checkbox"/> There is no routine follow-up
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Thank you for taking the time to complete this survey.