

Self-management strategies offer limited benefit in epilepsy

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based approaches (mean difference, 6.64). Self-management interventions did not reduce seizure rates, while a composite of seizures, emergency department visits, and hospitalizations was reduced with one educational [intervention](#).

"These self-management approaches showed clinically important benefit for only a few outcomes, but the confidence in these findings was mostly low," the authors write. "Further, the effect of educational interventions on [quality of life](#) and self-efficacy varied inexplicably."

Several authors disclosed financial ties to the [pharmaceutical industry](#).

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(HealthDay)—Limited evidence suggests that self-management strategies modestly improve some outcomes among persons with epilepsy, according to a review published online July 2 in the *Annals of Internal Medicine*.

Matthew W. Luedke, M.D., from the Duke University Medical Center in Durham, North Carolina, and colleagues examined the components and efficacy of self-management interventions in the treatment of epilepsy in community-dwelling individuals. Data were reviewed from 13 randomized and two nonrandomized studies involving 2,514 patients.

The researchers found that interventions were mainly delivered in group settings and employed a median of four components following two general strategies: one based on education and one on psychosocial therapy. Self-management behaviors were improved with education-based approaches (standardized mean difference, 0.52), while quality of life was improved with psychosocial therapy-

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