



# Contraception: advice for people with epilepsy

NICE indicator

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[www.nice.org.uk/indicators/ind117](https://www.nice.org.uk/indicators/ind117)

## Indicator

The percentage of women with epilepsy who are aged 18 or over, but under 45, who are taking antiseizure medications and have a record of being given information and advice in the previous 12 months about pregnancy or conception, or contraception tailored to their pregnancy and contraceptive intentions.

## Indicator type

General practice indicator suitable for use outside the Quality and Outcomes Framework. Assessment of available data highlights that the average population size per practice is less than 20 patients.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

## Rationale

The [Medicines and Healthcare Products Regulatory Agency's Public Assessment Report of antiepileptic drugs: review of safety of use during pregnancy](#) indicates that antiseizure medications taken during pregnancy are associated with an increased risk of major congenital malformations (MCMs). The risk is greater at higher doses and with polytherapy compared with monotherapy. Some antiseizure medications are associated with a higher risk of neurodevelopmental impairments and fetal growth restriction. The type and level of risk differs according to the specific antiseizure medications taken by the mother during pregnancy. These risks need to be balanced against risks to the mother and the unborn baby of uncontrolled seizures. It is important to ensure that women and girls with epilepsy have access to appropriate advice and information about pregnancy or conception, or contraception tailored to their pregnancy and contraceptive intentions, and that this can be updated during regular reviews as their circumstances change.

Valproate must not be used in pregnancy, and it must not be used in girls and women of childbearing potential (including young girls who are likely to need treatment into their childbearing years) unless other options are unsuitable and a pregnancy prevention programme in place, in line with the [MHRA safety advice on valproate](#). This is because of the risk of malformations and developmental abnormalities in the baby.

## Source guidance

[Epilepsies in children, young people and adults. NICE guideline NG217](#) (2022, updated 2025), recommendations 2.1.11, 4.4.1, 4.4.2, and 4.4.4

## Specification

Numerator: The number of women in the denominator who have a record of being given

information and advice in the previous 12 months about pregnancy or conception, or contraception tailored to their pregnancy and contraceptive intentions.

Denominator: The number of women with epilepsy aged 18 or over, but under 45, who are taking antiseizure medications.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: Women who have been sterilised or undergone partial or complete removal of the uterus.

Minimum population: The indicator would be appropriate to assess performance of collaborations or networks of GP practices serving populations of around 30,000 to 50,000.

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