**Position:** The Epilepsy Foundation actively supports the increased use of generic medications as a way to save money in healthcare. Because medications are a major cost of epilepsy, the availability of less expensive versions of brand name medicine can be very good news for people with epilepsy. However, medication switching can lead to breakthrough seizures. This is a major concern because seizures are serious events that can have considerable cost to one's health, well-being, and financial status – and can even be life threatening for the person experiencing the seizure, or because that person accidentally injures someone else during the seizure. **The Epilepsy Foundation recommends that consent must be obtained from the individual with epilepsy and their physician before any such substitutions are made – to avoid potentially life-threatening seizures.**

**About Epilepsy:** The Epilepsy Foundation is the leading national voluntary health organization that speaks on behalf of nearly 3 million Americans with epilepsy and seizures. We foster the wellbeing of children and adults affected by seizures through research programs, educational activities, advocacy, and direct services. Epilepsy is a medical condition that produces seizures affecting a variety of mental and physical functions. Approximately 1 in 26 Americans will develop epilepsy at some point in their lifetime.

**Background:** While most patients can safely switch their medications among different formulations of the same antiepileptic medication, members of the epilepsy community have for years reported experiencing seizures and other harmful side effects after switching from one version of an antiepileptic drug (AED) to another, whether the switch was brand-to-generic, generic-to-brand, or generic-to-generic. By law, the amount of medication delivered by one AED may differ from the amount delivered by another AED that the Food and Drug Administration (FDA) deems "equivalent," and it may deliver the medication at a different rate. There is growing evidence that these variations, however slight, can mean the difference between controlled epilepsy and breakthrough seizures or other negative consequences.

Patients today are most typically switched from brand-name drugs to generics, or from one generic drug to another, for a single, non-clinical reason: pressure to reduce costs. In most states, unless a physician explicitly writes "dispense as written" or "no substitution," pharmacists can switch a patient to a lower-cost generic drug without the consent or knowledge of either the patient or the physician.

The Epilepsy Foundation appreciates that cost-control is a worthy goal and, in general, it enthusiastically supports providing patients with greater access to generic medications. The Foundation is committed to the welfare of people with epilepsy and their families, and the high cost of many name-brand medications is a particularly significant issue for people with epilepsy, many of whom will take medication on a daily basis for the remainder of their lives. The Foundation welcomes the opportunity that generic medications present to lower the overall costs of delivering effective healthcare to individuals and society.

But the Foundation believes equally that short-sighted cost considerations should never be allowed to trump efficacy or take precedence over patient welfare. Indeed, if a patient is switched off of a well-functioning drug to avoid costs, the direct economic consequences borne by society if the cheaper drug
Medication Switching

fails—whether incurred in the form of increased ambulance rides and emergency-room admissions, greater numbers of in-patient doctor visits, or lost worker productivity will quickly eliminate any short-term savings occasioned by the switch. Meanwhile, the concurrent human costs borne by patients and their families can be immeasurable.

Generic drugs can save you money, but not when switching among different versions causes seizures or side effects

If you have any questions or concerns, please contact Angela Ostrom, COO & Vice President Public Policy at aostrom@efa.org or 301-918-3766.