



## OBJECTIVE

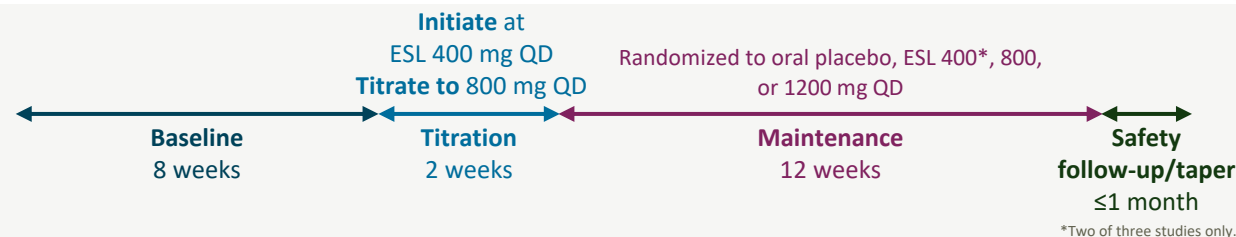
To investigate the safety and tolerability of ESL QD in older and younger adult patients



## STUDY DESIGN

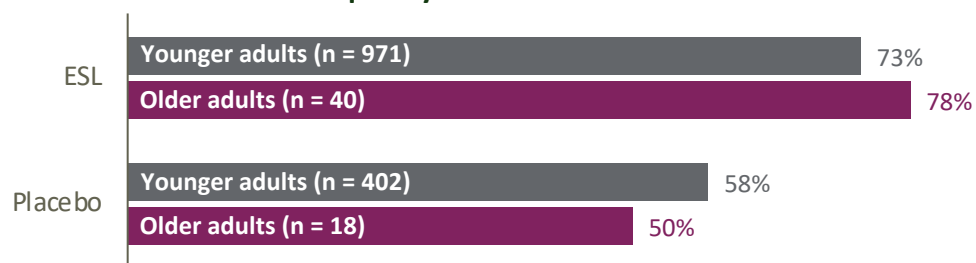
### Pooled data from Phase III clinical trials

- Patients aged ≥16 years with focal seizures not adequately controlled with 1–3 ASMs
- Post hoc analyses were performed
- TEAE frequency was calculated for younger (18–59 years) versus older (≥60 years) adults

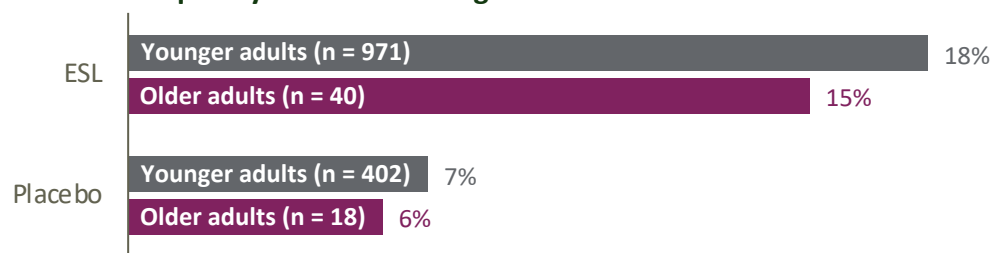


\*Two of three studies only.

### Overall TEAE frequency

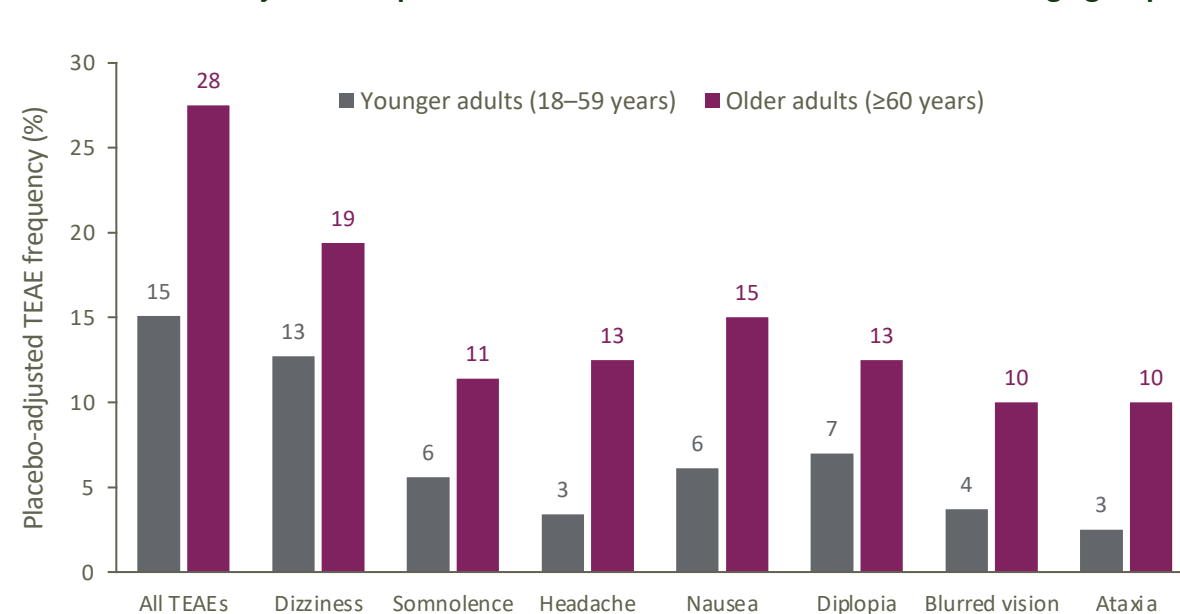


### Frequency of TEAEs leading to discontinuation



The frequency of TEAEs leading to discontinuation increased with increasing ESL dose

### Placebo-adjusted frequencies of TEAEs with ≥5% difference between age groups<sup>1</sup>



The placebo-adjusted frequency of TEAEs was generally higher in older versus younger adults



## CONCLUSIONS

These results support the safety and tolerability of ESL in older adults aged ≥60 years. However, increased ASM load associated with adjunctive therapy may complicate treatment selection in older patients, due to risk of increased AEs. As is common practice for all ASMs, balancing clinical response and tolerability is needed in this vulnerable group of patients.