



# Brivaracetam is a New Antiepileptic Drug Currently Approved for Additional Treatment in Patients with Partial Onset Seizures

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## DESCRIPTION

Similar to Levetiracetam (LEV), BRV acts by binding to her SV2A vesicles with high affinity and a linear pharmacokinetic profile. Retrospective studies and randomized clinical trials have already demonstrated the efficacy of BRV, including in patients who failed treatment with LEV. Most efficacy and safety studies conducted to date have been conducted in adult cohorts, but few studies have been conducted in children. However, although BRV has been shown to be a useful ASM in pediatric focal epilepsy, studies in patients with generalized epilepsy and epileptic syndrome are few and conflicting. Maintenance rates were high in the analyzed cohort, and no serious treatment-emergent adverse events were reported in the majority of patients, with the most commonly reported adverse events being somnolence, somnolence, irritability, and aggression. I had anorexia and anorexia. So far, few original papers on this subject have been published, but analyses of the literature data demonstrate the efficacy and safety of BRV in pediatric patients with partial seizures aged 4 years to 16 years. More evidence has been shown for children. However, positive responses have also been obtained in patients with encephalopathic epilepsy (e.g., Jeavons epilepsy, Dravet syndrome, Lennox-Gastaut syndrome, juvenile myoclonic epilepsy, etc.) Medium studies are currently testing BRV to expand its use in other forms of epilepsy and epilepsy.

The publication behaviour of paediatric ophthalmology scholarship applicants, particularly the rate of undetectable and incomplete publications, has not been previously reported. In his 5 year cross-sectional retrospective study of grant candidates, his 2.1% of papers listed as published were unverifiable, and only 49% of manuscripts listed as pending were published within his 5 years was found to have been published in applicants with additional degrees or previous fellowship training were less likely to list incomplete publications and more likely to list

more manuscripts than in preparation. Gender, international medical school status, USMLE level scores, and number of publications did not correlate with non-verifiable publications.

Advances in molecular genetics over the past three decades have helped identify a significant number of genetic variants that cause hereditary eye diseases that can be rapidly identified by appropriate genetic testing within clinically useful windows. With this advance in knowledge, the roles of genetics and ophthalmology in patient care are becoming increasingly intertwined, making the need for sub-specialists in the field of ophthalmic genetics paramount. As a result of continued medical specialization, technological advances in genetics, and knowledge amassed in his more than a century and a half of cataloguing ocular pathologies, ophthalmic genetics has become a new subfield of ophthalmology. Due to the dizzying pace of progress, genetics and genomics are playing a major role in ophthalmology, and to meet the growing needs of a growing population, subspecialties with the same level of detail and breadth of knowledge as other ophthalmic subspecialties are being developed. Specialists are now needed.

Ophthalmology education in undergraduate medical colleges is declining, and graduate medical professionals are expressing concerns about basic assessment and treatment of eye conditions. With an aging population, the need for ophthalmology continues to increase, highlighting the growing need for eye care. This article provides 12 tips for improving undergraduate ophthalmology education.

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## CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

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