

Cenobamate effectiveness and safety in an Italian cohort of people with epilepsy: second interim results from the BLESS observational study

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OBJECTIVES

- The BLESS Study [NCT05859854] aims to describe the effectiveness and real-world safety of cenobamate as an adjunctive treatment in adult patients with uncontrolled focal epilepsy in Italy.
- Here, we report the second interim analysis results, focusing on clinical outcomes at 12 and 24 weeks after cenobamate initiation (index date).

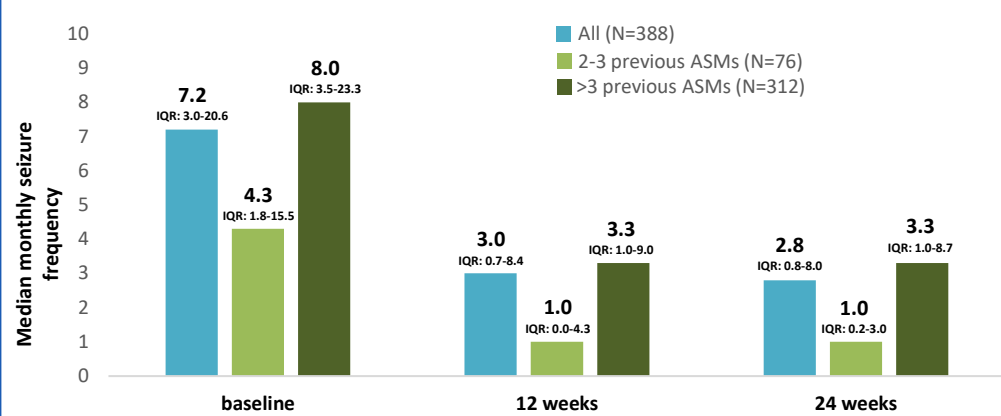
MATERIALS & METHODS

- BLESS is a multicenter, observational prospective and retrospective cohort study conducted across 50 clinical sites in Italy. Data collection started in January 2023 and is currently ongoing.
- This interim analysis included patients enrolled up to June 6, 2024 (database extraction date), with effectiveness data available in the first 24 weeks after index date.

RESULTS

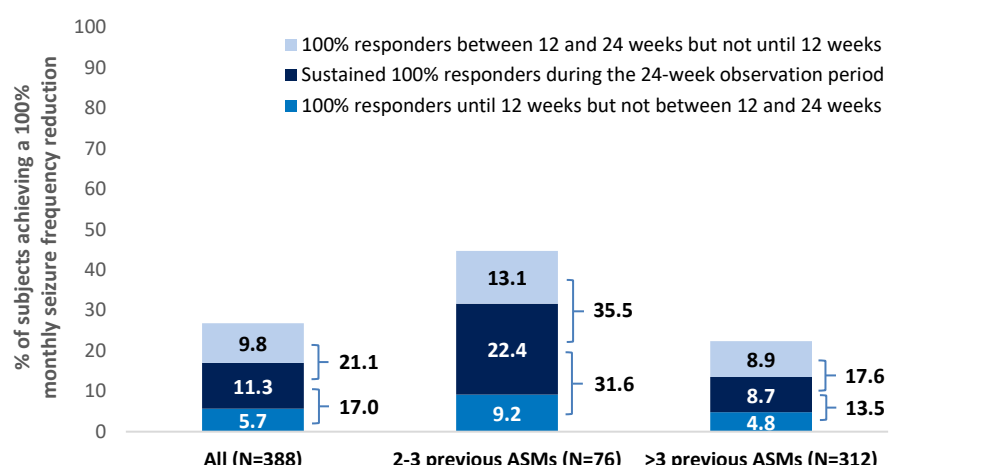
- A total of 388 participants were included in the analysis. The median (interquartile range [IQR]) monthly seizures at pre-treatment baseline were 7.2 (3.0-20.6), with 19.6% (n=76) of participants being treated with 2-3 previous anti-seizure medications - ASMs (early users) and 80.4% (n=312) with >3 previous ASMs (late users).
 - The overall reduction in median (IQR) monthly seizures from baseline to 12 weeks and 24 weeks was 55.7% (-89.6%; -14.4%) and 59.9% (-87.3%; -19.2%), respectively [Figure 1]. Among all participants, 59.0% (n=229) of them were ≥50% responders at 24 weeks and 11.3% (n=44) achieved 100% sustained seizure freedom from baseline to 24 weeks. Sustained seizure freedom at 24 weeks was obtained by 22.4% (n/N=17/76) of early and 8.7% (n/N=27/312) of late users [Figure 2].
 - A total of 91 (23.5%) subjects reported 144 adverse events, with 115 being adverse drug reactions (ADRs) to cenobamate, most commonly somnolence (n=38), dizziness (n=10), and balance disorder (n=8). ADRs were observed in 23.4% of late users (110 ADRs occurred in 73 patients) and in 5.3% of early users (5 ADRs in 4 patients).
- ## DISCUSSION
- This analysis expanded on the findings of the first interim analysis by including a larger number of participants.
 - Improvement in seizure control was observed as early as 12 weeks with a gradual reduction in the seizure frequency throughout the treatment period, including titration.
 - No safety concerns were identified in either early or late users.
 - The results seem to underscore cenobamate potential as an effective treatment option for uncontrolled focal epilepsy in the Italian sites of the BLESS Study.

Figure 1. Monthly seizure frequency at pre-treatment baseline, 12 weeks and 24 weeks.



ASM: anti-seizure medication; IQR: interquartile range.

Figure 2. Rates of 100% reduction in monthly seizure frequency from the pre-treatment baseline.



ASM: anti-seizure medication. Percentages were computed over the total number of evaluable subjects in each subgroup.

CONCLUSIONS

Interim results from the BLESS Study suggest that cenobamate is effective in improving seizure control in a real-world clinical setting with a manageable safety profile, especially in early users.

REFERENCE

Lattanzi S et al. Effectiveness and safety of adjunctive cenobamate in people with focal-onset epilepsy: Interim results after 24-week observational period from the BLESS study. *Epilepsia*. 2025 Jul;66(7):2239-2252. doi: 10.1111/epi.18357.

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