

International Conference on **Epilepsy & Treatment**

September 21-22, 2015 Baltimore, USA

Epilepsy surgery at a private Epilepsy center

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Rationale: The number of respective surgeries for patients with refractory epilepsy in the US may be declining. Reasons for this are not clear. One suggested explanation has been that respective surgeries are being done in non-academic centers and therefore are not being registered in academic center-based studies. The purpose of this study was to evaluate this hypothesis.

Methods: Charts were reviewed of all newly-evaluated patients seen in one private epilepsy center during a three year period from 6/1/2010 to 5/31/2013.

Results: 699 patients were evaluated (F=389, M=310, mean age 46 range 14-93). Of these, 537 had focal epilepsy. 355/537 (66.1%) of patients with focal epilepsy had pharmacoresistant epilepsy. 110/355 (31.0%) of these patients were admitted to EMU for long term video EEG monitoring. 64 of these patients had unifocal, 22 multifocal and 20 had non-localizable or non-lateralizable findings ictal EEG abnormalities; 4/120 had normal LTVEEGs. Of the 64 patients with unifocal EEG findings, 44 were temporal, 12 were frontal, 4 were parietal and 2 were occipital. Of the unifocal temporal EEG abnormalities, 22 were right sided and 22 were left sided. 11/64 of the patients with unifocal EEG abnormalities agreed to further surgical evaluation and underwent further pre-surgical testing. 4/11 failed pre-surgical work up (3 because of failed pre-surgical memory evaluation, one for language lateralization). 7 patients underwent surgical resection.

Conclusion: The number of respective surgeries done at a private epilepsy center is not high. It is unlikely that shift of surgeries from academic to private epilepsy centers explains the decline in respective surgeries noticed by academic epilepsy centers.

Biography

Jacquelin R Arguello is currently in her 4th year of Undergraduate education (BS in Neurobiology/Physiology) at University of Maryland, College Park. She was an Intern at Mid-Atlantic Epilepsy & Sleep Center participating in research studies and patient care from February 2013-present. She is currently an Intern at a multispecialty office at Holy Cross Hospital.

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