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Non epileptic seizures: Challenges of diagnosis and treatment in clinical psychiatric practice in South Africa

Nada Lagerstrom, Psychiatrist and Ori R Valkenberg Hospital, South Africa

Non epileptic seizures (NES) are defined as paroxysmal behaviors which resemble epileptic seizures (ES) but without pathognomonic electrophysiological correlate. NES are further classified as psychogenic (PNES), which are thought to be caused by psychosocial factors, and/or "other" (oNES) which may occur in some other clinical medical conditions. Globally NES present diagnostic and therapeutic challenge, as well as psychosocial burden. Studies show that it takes on average 7 years before the diagnosis is made in patients with treatment resistant seizures, and the cost carried is approximately 100 000 american dollars per patient (excluding the cost of treatment post diagnosis). There are numerous difficulties in achieving correct diagnosis and applying adequate treatment measures, ranging from deficiency in health services resources, both technical and human, to stigma and obstructive cultural and religious beliefs. Some studies show direct correlation between reduction in NES and country's economic status. South Africa is developing country with very diverse and unique socio-demographic fabric. Public health services, which accommodate over 80% of South African population, mainly of lower socio-economic status and extreme poverty, are overburdened and under-resourced. This often leads to inadequate and incomplete medical work up, which, applied to the context of NES, means that psychiatrists will have to manage complex patients who are referred to them with scarce history and less than basic prior investigations. This paper aims to address the challenges faced in clinical psychiatric practice in South Africa regarding diagnosis and management of NES, with focus on PNES and solution based approach.

## **Biography**

Nada Lagerstrom is a psychiatrist currently	y working and Valkenberg Psychiatric Hospital	, University of Cape Town. Dr Ra	asmita Ori is a subspecialist Neuropsychiatris
currently working in Valkenberg Hospital,	University of Cape Town, as consultant and I	lecturer, and in private practice.	

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