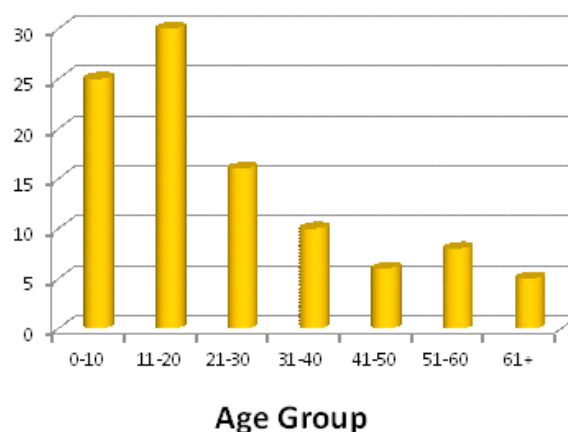


2020 Market Analysis of Epilepsy and Brain Disorders Conference

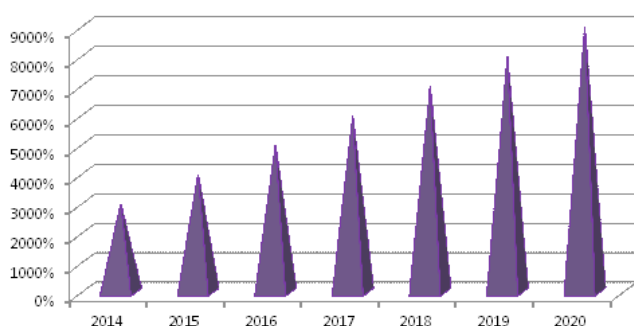
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Around 50 million individuals right now live with epilepsy around the world. The assessed extent of the all-inclusive community with dynamic epilepsy (i.e. proceeding with seizures or with the requirement for treatment) at a given time is somewhere in the range of 4 and 10 for every 1000 individuals. Nonetheless, a few investigations in low-and center pay nations to recommend that the extent is a lot higher, somewhere in the range of 7 and 14 for every 1000 individuals. All around, an expected 2.4 million individuals are determined to have epilepsy every year. In high-salary nations, yearly new cases are somewhere in the range of 30 and 50 for each 100 000 individuals in the all-inclusive community. In low-and center salary nations, this figure can be up to multiple times higher. This is likely because of the expanded danger of endemic conditions, for example, jungle fever or neurocysticercosis; the higher occurrence of street activity wounds; birth-related wounds; and varieties in the medicinal foundation, accessibility of precaution wellbeing programs and open consideration. Near



Projected prevalence of Epilepsy through 2020



Studies investigating the prevalence and incidence of epilepsy are increasingly common, particularly in low- and middle-income countries. Estimates of the prevalence and incidence of epilepsy worldwide vary considerably, likely reflecting differences in measurement and reporting, along with clinical characteristics such as etiology and seizure type. Previous systematic reviews of the prevalence of epilepsy focused on specific regions (China, Europe, Latin America, and Arab countries) and prior reviews on the incidence of epilepsy did not use meta-analyses to explore associated. Few of these studies explored potential sources of heterogeneity between estimates or they examined both prevalence and incidence globally.

Our aim was to estimate the prevalence and incidence of epilepsy from international studies, and to quantify the burden of epilepsy using meta-analytic techniques. We also explore the sources of heterogeneity between estimates, assessing factors such as age, sex, country income level, epilepsy syndrome, seizure type, epilepsy etiology, and study quality.