The **American Epilepsy Society** (AES) is one of the oldest neurological professional organizations in the nation, with roots dating to 1936. The Society was founded as the American Branch of the International League Against Epilepsy (ILAE) in 1936 and formally adopted its current name in 1954.

The Society, which is the United States Chapter of the International League Against Epilepsy (ILAE), has grown from a small organization formed during a dinner meeting in Kansas City, Missouri in 1936 to a membership of approximately 3,000 people from almost 50 countries. Although the Society was initially a physician-oriented society, it now unites physicians, nurses, basic scientists, and many other healthcare professionals who are committed to improving the lives of people with epilepsy through research and education. The Society’s support of these endeavors occurs in a variety of forms, including AES-sponsored grant programs, research awards, publication of *Epilepsy Currents*, and the AES’s Annual Meeting.

**MISSION**

*The American Epilepsy Society promotes research and education for professionals dedicated to the prevention, treatment and cure of epilepsy.*

Its 3,000 plus members are clinicians, researchers investigating basic and clinical aspects of epilepsy, and other healthcare professionals interested in seizure disorders. Members represent both pediatric and adult aspects of epilepsy.

The Society is based in West Hartford, Connecticut, and holds an Annual Meeting that offers symposia, lectures, poster presentations and exhibitions. The Meeting attracts more than 4,000 professionals from around the world and offers excellent opportunities for networking and sharing of ideas.
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Photo credit: Caballero Photography
CONGRATULATIONS
AES
ON 75 YEARS

OF PROMOTING RESEARCH AND EDUCATION
FOR PROFESSIONALS IN EPILEPSY.
It is a tremendous honor to serve the American Epilepsy Society in this 75th Anniversary year. I’m amazed by what this organization has done and what it’s planning to do. This has been an eventful year where we took advantage of several unique opportunities to advance our mission.

Under past President Jaideep Kapur’s leadership, we started organizing our clinical committee’s into a single structure. This has evolved into the Council on Clinical Activities chaired by Page Pennell. The goal of the Council is to provide resources to help the practitioner in all disciplines to deliver the best epilepsy care. The committees are Practice Management, chaired by Barbara Dworetzky; Treatments, chaired by Ed Faught; Guidelines, chaired by Shlomo Shinnar; and Resources and Information, chaired by Patty Shafer. The Committees are broken into workgroups that are working on tasks including examining existing resources and developing practice tools for our members. You can find these resources, including links to guidelines, on http://www.aesnet.org/go/practice. The Council has developed a list of terminology to guide development of new practice related documents and to help categorize resources found outside our society.

Clinical and Basic Science continue to be pillars of our society. AES is involved not only in funding research but also in identifying new directions in epilepsy research. We support workshops like the Gordon Conference and fund four pre-doctoral and three postdoctoral fellowships each year. We disseminate new research news at our Annual Meeting through symposia, investigators workshops and posters as well as through our journal, Epilepsy Currents. Recently we commissioned a joint AES/ILAE Translational Research Task Force to look at new issues and trends and develop the programs to meet our member’s needs. They will shortly be publishing an article that has been endorsed by both AES and ILAE. We hope to see this and other articles on new ideas discussed in our own journal, Epilepsy Currents.

We are working to embrace new technology to improve communication for member activities. Most committees and some special interest groups are already using this members-only networking program, Professional Connection http://connect.aesnet.org/home/, to share documents and discuss issues. Every member has a profile that links you to your committee discussion and library pages. By posting your interests you can build your networking community. This spring we began using Professional Connection committee volunteer preferences. Committee chairs have already started using this online tool to identify appropriate volunteers. In addition to these practical uses, several members have started very active blogs. Congratulations again to our most active users, Ibrahim Elmenshawi and Jose Cavazos. Dr. Elmenshawi won free registration to this year’s Annual Meeting for being our most active blogger for a period this spring. We thank our younger members for showing us baby boomers how to make use of this new technology.

One of my main focuses this year has been to enhance our relationships with other organizations. We have already spent time with the American Academy of Neurology, the Epilepsy Foundation, the American Board of Psychology and Neurology and the International League Against Epilepsy. We will continue to strengthen these relationships as we expand our outreach efforts. These relationships cover education, research funding and communication issues as well as leveraging our particular strengths to help each other achieve our missions.

In addition to the above outreach efforts, we continue to work closely with the patient advocacy and non-profit groups through the Vision 2020 Committee. Thanks to Frances Jensen, we had the opportunity to work on an IOM report on epilepsy that involved AES members, experts in related fields, patients and patient advocacy organizations. AES spearheaded this effort and organized the contributions of the other organizations. The report is expected to be published next year and we are looking forward to helping disseminate it. For the latest on this report go to (www.iom.edu/epilepsy).

Lastly, I’d like to thank you for your support of our fledgling fundraising efforts to make our research and education efforts self supporting. As everyone now realizes, the economics of professional societies have changed drastically in just the last few years. With the leadership of Dennis Spencer, we’ve raised $1.1 million toward a $2.5 million goal. The Epilepsy Foundation’s Walk has become a wonderful tool for our members to raise funds. The success of our development efforts depends on each and every one of you to contribute your time, talent and treasure. For more information on participating go to http://www.aesnet.org/contribute.

See you in Baltimore!
I am happy to report that AES continues to grow, thrive and provide new services to its members, thus laying the foundation for a bright future.

The Annual Meeting continues to be THE place for presenting the best epilepsy research. Our symposia, courses, special interest groups and poster sessions are packed with members, eager to share their experience, research and knowledge of epilepsy. We are at the forefront of bringing together scientists, clinicians, social workers, nurses, pharmacists, neuropsychologists and more, who share a passion for caring for patients with epilepsy. The lively exchange of ideas at our Annual Meeting makes it one of the most vibrant and intellectually stimulating events of its kind. More than 4,000 individuals from around the world attended our meeting in San Antonio last year.

Although epilepsy is recognized as one of the most common neurological conditions in the US, its public health burden is poorly understood. The Institute of Medicine of the National Academy of Sciences has undertaken to perform a study of the public health dimensions of the epilepsies. The committee will determine priorities for future population health studies to inform treatment and prevention of epilepsies. It will explore ways to increase access to health and human services and the quality of care for people with epilepsy, and explore ways in which education and training of professionals can be improved.

These Institute of Medicine reports can have tremendous public health impact. We are working with many groups interested in epilepsy, including Epilepsy Foundation, Citizens United for Research in Epilepsy, Epilepsy Therapy Project, International League Against Epilepsy, Tuberous Sclerosis Alliance, and many others through a coalition called Vision 2020 to leverage this report into better care for patients with epilepsy.

One way we reach our members is through our journal, Epilepsy Currents. Last year was a period of significant reorganization of the journal, which will now be published by the Society. This will allow us to expand the journal, its offerings and to publish the proceedings of the Annual Meeting.

To help improve the epilepsy training and continuing medical education of neurologists we have partnered with the American Academy of Neurology to offer a whole day of programming on epilepsy at its 2012 meeting in New Orleans. We also partnered with the Academy to fund the new Susan Spencer Clinical Research Training Fellowship in epilepsy. This will train new clinical epilepsy fellows in clinical research who then will bring new treatments for our patients.

AES continues to be engaged with the rest of the world through its role in the International League Against Epilepsy (ILAE). We have forged closer relationships with the Latin American Commission and European Commission on Epilepsy. There will be a joint North American and European Commission symposium at our Annual Meeting in Baltimore in 2011 and at the European Epilepsy Congress in 2012. The Spanish Language Symposium at the AES Annual Meeting is now held in collaboration with the members of Latin American Commission. In addition, Spanish translation of the International Symposium will be available during the 2011 Annual Meeting.

A major fundraising campaign was started last year. In order to fulfill its mission of education and research in epilepsy with a goal to improve clinical care, the Society needs permanent resources to support its programs. These permanent resources have to be separate from fees for day-to-day operations. I am happy to report that the Society has already raised a significant sum, but much more remains to be done. Currently only about 1/5th of our membership contributes to this campaign. I would urge you to participate.

As I end this report, I remind you that this is the 75th Anniversary of the founding of our Society. We can look forward to our future with tremendous optimism and a sense of achievement. AES is blessed with thousands of dedicated, hardworking volunteers who can only lead it to greater successes in the future.
Report from the EXECUTIVE DIRECTOR

M. Suzanne C. Berry, M.B.A, CAE

Who Cares About a 75th Anniversary?

As I was thinking of what to write for this article, I have been immersed in plans for AES’s 75th Anniversary celebration. I had “writer’s block.” And my procrastination added to Cheryl-Ann Tubby’s (Assistant Executive Director) increasing stress level in trying to get the Annual Report finished, to the proofreader, to the printer and finally shipped in time to get out before the Annual Meeting. So, I resorted to Google to look up the history of anniversaries and maybe a definition or two.

Here is what I found:

“From the dawn of humanity, when Homo Sapiens first began walking upright, they have always been a group of dedicated party animals. Life was hard in those days, what with fighting off cave bears and saber toothed tigers. The Ice Age made modern winters look silly. Food was hard to come by. There was no such thing as walking down to the markets. It was a rough existence. Any excuse for celebration was welcome.

If the fish were biting and there was a good catch . . . a fish party! If hunters managed to bring home a wooly mammoth so that the tribe could eat for awhile? Yes . . . a mammoth party.”

Some of you may recall the good work that Howard Goodkin, did in 2006 when he recommended to the AES Board of Directors that they reconsider the date that AES was formed. Howard convincingly made the case that the organization really was formed in 1936 and just because it did not convene a meeting for a 10 year period, this should not have any impact on its “birth date.” In fact, many organizations could or did not meet during the late 1930s/early 1940s due to the depression and World War II. So in 2006, the Board vote accept a new date for the Society’s official beginning….1936, instead of the previous one, 1946.

This year we have some very special ways that we will be recognizing AES’s 75th Anniversary.

• In 2010, AES launched its Building for the Future Campaign designed to add an additional $2.5 million to the existing $5.0 million endowment funds. The idea of the campaign was born when Cesare T. Lombroso, M.D., Ph.D. donated his Lombroso Trust to the AES. This incredibly generous act caused the board to realize that AES could make a difference in its support of funding grants and fellowships. Our leadership was inspired to raise money to ensure that there would be future young investigators coming into the field.

We reached out to all of our corporate supporters and asked for a one time charitable contribution to our Building for the Future Endowment Funds. They listened and close to $450,000 has been raised. Although you will see the names of the companies very prominently throughout the Annual Meeting venue, I want to thank them all here. We hope that other companies might join this very special group and share our vision: UCB, GlaxoSmitKline, Eisai, Cyberonics, Nihon Kohden, Sunovion, Questcor, Lundbeck, Supernus, Pfizer, Upsher-Smith and Electrical Geodesics. A WONDERFUL EVENT HAS BEEN PLANNED FOR Saturday evening, December 3. We have invited all of the non-profit advocacy organizations to host receptions celebrating their fellows and grantees that evening before our core event. Our goal was to have all attendees under one roof for the celebration event. Many medical school alumni groups will also be hosting events as well as many of our corporate supporters. All in all, there will be 20 or more separate receptions prior to our core event.

• Our core event will be a walk down “Memory Lane” with wonderful posters reflecting what was going on in Epilepsy and AES during each of the decades beginning with the 1930s. The last exhibit area will be dedicated to predictions shared by members attending the event. What is your vision for AES and epilepsy treatment in the next 10 years? Can we find a Cure?

Our intention is to make this event very inclusive and to make the price affordable for all attendees. A portion of the money raised from our corporate supporters will be used to defray the cost for junior members to attend.

• The evening will conclude with a dessert reception and dancing to the wonderful music provided complimentary by the Dysrhymics. The band consists of AES long time members- Bob Fisher (clarinet), Steve Schachter (piano), Phil Pearl (vibraphone), Chris Anderson (drums) and Brian Litt (bass).

In closing, the important thing to remember from the long history of anniversaries is that they started out as a reason to celebrate and relieve the stress of daily life. Clearly, we are not celebrating the killing of a “wooly
mammoth”, but we are celebrating the passion of professions dedicated to the prevention, treatment, and cure of epilepsy. We honor those AES members and visionaries who paved the way for members and professionals still in the trenches today. We also take a moment to acknowledge the people with epilepsy and their families for believing that all of us can make a difference for them. This is our inspiration and what keeps AES celebrating is history and making plans for the future.

Thank you for the honor to be your Executive Director since 1990. I am truly blessed with the opportunity of serving all of you and to work beside a remarkable and energetic staff. I would like to acknowledge the AES Board of Directors, committee chairs and members for giving back to the profession in so many ways. The hours that are spent on conference calls, committee meetings, testifying before government agencies, board meetings, and I could go on more, is truly awesome.

Happy 75th Anniversary AES!

-- M. Suzanne C. Berry, M.B.A., CAE

American Epilepsy Society Staff

Executive Director
M. Suzanne C. Berry, M.B.A., CAE

Assistant Executive Director
Cheryl-Ann Tubby, IOM, CPP

Director of Meetings
Jeff Melin, M.Ed., CMP

Membership Services
Kathy Hucks

Association Administrator
Kate Flaherty

Annual Meeting Group
Elizabeth W. Kunsey, CMP

Elizabeth Pillsworth, CMP

Jessica Tedford

Cathy Sluboski

Education Group
JoLynn Amsden

JoLynn Amsden

Financial Group
Gary Diak

Development Group
Susan Cipriani

Natalie Judd

Communication
Peter VanHaverbeke

American Epilepsy Society Staff
Celebrating 75 Years of Volunteer Leadership

1936 William Lennox  
1937 Temple Fay  
1938 Irvine McGuirnie  
1939 Stanley Cobb  
1940 Tracey Putnam  
1941 H. Houston Merritt  
1942 William Penfield  
1943 Theodore Ericsson  
1944 Charles Ainge  
1945 Charles Ainge  
1946 Charles Ainge  
1947 Haddow MacDonald-Ketch  
1948 Francis Macnaughton  
1949 Frederic Gibbs  
1950 Ephraim Roseman  
1951 Francis Forster  
1952 Francis Forster  
1953 Rennick Bailey  
1954 Richard Mestand  
1955 Russell DeJong  
1956 James O'Shea  
1957 Jerome Merin  
1958 Roland McKay  
1959 Robert Aird  
1960 Peter Killaway  
1961 William Cawaross  
1962 Theodore Rasmussen  
1963 Gilbert Oster  
1964 Robert Dow  
1965 Richard Schimpf  
1966 J. Preskin Robb  
1967 David Dally  
1968 E. Goldmann  
1969 Philip White  
1970 Richard Walker  
1971 Gian-Erino Chatrian  
1972 Arthur Ward  
1973 Casimir Aronne-Mirman  
1974 David Prince  
1975 J. Kiften Perry  
1976 Pierre Dikmen  
1977 Dominick Purpura  
1978 Fritz Grefus  
1979 Paul Brandall  
1980 Robert Gurvit  
1981 Barry Tinch  
1982 Robert Grossman  
1983 Harold Becker  
1984 James Cerghino  
1985 Jerome Engel  
1986 Richard Mattson  
1987 Genevieve Lombroso  
1988 Barbara Westmoreland  
1989 John Walds  
1990 Roger Porter  
1991 Bradon Wasserman  
1992 Timothy Reidy  
1993 James McNaughton  
1994 Bo Lippik  
1995 James Ferrerelli  
1996 Philip Schwartzkron  
1997 Marc Dichter  
1998 Robert MacDonald  
1999 Robert Fisher  
2000 Susan Spencer  
2001 Benjamin Mohab  
2002 Thomas Sutula  
2003 Jeffrey Noellas  
2004 Daniel Lowenstein  
2005 Joan Austin  
2006 Gregory Holmes  
2007 John Swann  
2008 Denise Spencer  
2009 Steven Stocchi  
2010 Walter Kaplan  
2011 John Pellock
The American Epilepsy Society closed the books on fiscal year 2010-2011 as of June 30, 2011. The information you see in this report is unaudited, but in the interest of providing our membership with up-to-date information, we are reporting our preliminary results to you now. An audited statement will be ready in November 2011 and will be available on the AES Web site at www.aesnet.org.

This report is an overview of where we stood at the end of Fiscal Year 2010/2011 and a look forward to Fiscal Year 2011/2012. Despite a budgeted deficit, we finished fiscal year 2011 with a significant surplus. Our policy states that any operating surplus is split between the Annual Fund and the Long Term Reserve Fund. The Annual Fund is used for our research and training programs as well as new projects.

### Total Revenue

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<td>Membership Operations</td>
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<td>Education*</td>
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*Includes Annual Meeting

### Total Expenses

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<td>Education</td>
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<tr>
<td>Research</td>
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<td>Publications/Products</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$3,913,751.44</strong></td>
</tr>
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</table>

### Overview of FY 2010-2011 Budget

The 2010/2011 fiscal year budget reflected our mission of education and research, and these were our biggest expenditures. Much of our research investments are generated from Annual Meeting revenue surplus, which demonstrates our commitment to our mission.

We have experienced continued pressure from the weak economy, CME rules, and government regulations on industry support. Several years ago the Board charged the Annual Meeting to reduce the dependence on industry support. This moved us away from the traditional sponsorship models common in professional societies. Budget reductions were made reflecting the loss of support for food events. Luckily, we were able to get non-profit tax exemption status from the State of Texas for our Annual Meeting in San Antonio which saved us money. We made a concerted effort to bring more device manufacturers into our exhibit hall and created new ways to help industry share their latest research.

As we plan for the 2011 Annual Meeting in Baltimore we continue to look for new ways to save money and increase revenues, while maintaining the extraordinary quality of our Annual Meeting. We continue to focus expenditures on programs and projects that support our Strategic Goals.

### Membership/Operations

- Dues stayed the same again this year and retention remains about 90%. Our total number of members is now over 3,000 and continues to grow.
- Our Operations revenue continues to be adversely affected by unrealized gains/losses (investments of funds adversely affected by fluctuations in the stock market) which are required to be included in the budget, but don’t actually affect the budget. Our Finance Committee has chosen a new financial manager and implemented strategies to minimize market impact on our investments.
- The finance committee meets regularly to review the investments with our managers to balance risk and reward during these rather volatile times.
- We continue to provide leadership training to Board members and Committee Chairs.
- Board meeting support costs are within budget. We are planning meetings to make more efficient use of ex-officio member time and hopefully reduce our meeting costs.

### Technology

- Annual Meeting symposia continue to be added to the website and we are working on making them easier to search and access.
- The online database continues to provide more benefits for members including access to their committees, dues payments and subscriptions.
- A new professional networking system was launched this year and its use continues to grow. Committees are using it to view and distribute documents and discuss ideas. Members are blogging about issues in the news.
- The ability to donate to research has been made easier with more options clearly available.

### Communications/Public Relations

- We produced six issues of Epilepsy Currents. The Journal is now self published resulting in a substantial cost...
savings without compromising the outstanding quality of the publication. We are pleased that the major transition of Epilepsy Currents to self publishing has remained within budget and we are beginning to see some advertising revenue.

- We produced four issues of AES News, which is now distributed through the website to save printing costs.
- The periodic member e-blasts continued throughout the year and the look was updated.
- The Communications Council continues to oversee all publications, media responses and PR efforts.
- The Annual Report is now published online only and is easily available year round.

**Professional Development**

- A Web based CME program titled: The Pharmacist’s Role in Epilepsy Management: Current Treatment Issues and Trends, was launched last year on ReachMD and is still available.
- A Web based CME activity on Medication Compliance was launched last year in partnership with Epilepsy.com/professionals and Epilepsy Therapy Project. CME is no longer offered, but the program is still available.
- A joint workshop was held this year on non-invasive devices for seizure detection, cognitive evaluation and traumatic brain injury/sports concussion assessment in partnership with the FDA, American Academy of Neurology (AAN) and National Academy of Neuropsychology (NAN)
- Plans for new year-round professional development programs are well underway. A series of recorded webinars for EMU Safety will be launched later this year and a conference on SUDEP is being planned for 2012.

**Annual Meeting**

- Registration numbers hit a record of 4,324 despite an increase in fees.
- The Annual Meeting continued to be a revenue generator with a net of $1,671,034. This surplus is actually less than prior years, we believe due to environmental and economic changes.
- Based on the directives of our Board and membership, we have gradually but substantially reduced reliance on corporate support for our meeting over the past 3-5 years. We are pleased that: we have kept the outstanding content and feel of the meeting and consistently had a surplus that feeds our research and education programs and projects.
- The part-time Medical Content Specialist position continued this year to assist with CME program development.

- A new Skills Workshop will be added to the 2011 meeting for local neurologists.

**Research and Awards Program**

- AES continues to directly fund three pre-doctoral and three post-doctoral fellowships. The Board voted to fund these directly from the budget instead of from surplus emphasizing our commitment to research.
- The Lennox Trust Fund provided one pre-doctoral and one post-doctoral fellowship this year.
- AES is committed to its involvement with other research funding organizations and will continue to support collaborative efforts with these organizations.
- The first Susan Spencer Clinical Research & Training Fellowship was given this year thanks to a partnership with the American Academy of Neurology and the Epilepsy Foundation.
- The Young Investigator and Nurse Awards, which are selected from submitted abstracts, continued to be offered. These awards provide travel stipends.
- AES continued to support the Epilepsy Research Recognition Award program with two awards.
- A fundraising campaign continued during the year to expand the Lennox and Lombroso Trust for Epilepsy Research & Training to ensure funds are available for future research.
- Two years ago we set the five year goal for our development campaign at $2.5 million. As of June 30, 2011, we have raised $1.5 million. This includes bequests and pledges. We are making very good progress toward our ultimate goal of becoming financially independent of commercial support.

**Future Outlook 2011/2012**

As we enter our new budget year (July 1, 2011 – June 30, 2012) we will continue the good work that was started this past year. As always, AES will continue to listen to feedback from our members in developing new programs and services.

Several new projects were approved as part of the 2012 Fiscal Year Budget. These include the continued development of the EMU Safety webinars, the SUDEP conference (Partners Against Mortality in Epilepsy), Skills Workshops at the AES Annual Meeting, and an update to the website including upgrading some web-based tools.

Over the next year, we will be continuing programs that are supported by a sound and conservative budget. We are unwavering in our commitment to education and research, in fact, the surplus from the Annual Meeting provides funds to support AES initiated projects and programs.
Retention and Growth

Growth -- Milestone Accomplished

During the recently ended fiscal year, our society broke a psychological number. AES now has more than 3000 members and continues to grow.

Three thousand, two hundred and thirty-eight (3238) individuals working and/or training in the field of epilepsy are members of the Society as this update is finalized in October, 2011, with dozens of applications pending review. The pie chart below illustrates these current numbers, in each member category:

![Member Type Pie Chart]

Five hundred and nine (509) applicants became new AES members between July 1, 2010 and June 30, 2011.

Retention Rates

June 30 is the official end of the AES Membership year. Each year AES strives for a 100% retention rate. By the time of the Annual Meeting the retention rate reaches 90%, yet when the AES fiscal year ends there is usually a long way to go.

On May 3, 2011, slightly over one hundred AES members had already paid their dues for the 2011-2012 membership year. The remaining two thousand, eight hundred, and twenty-six, whose dues were to expire on June 30, 2011 were sent a printed dues invoice via postal mail --- the first of two paper copies mailed to the AES membership in addition to multiple electronic invoices sent directly to each member. By June 30, 2011, the retention rate for the coming 2011-2012 year was 57% compared to 52% at the same time last year.

During the 2010-2011 fiscal year the retention before the Annual Meeting was 89%. Members who had not paid by the deadline did not receive the membership discount for the Annual Meeting but many were reinstated after the meeting. The final 2010-2011 retention rate with these reinstatements was 93%.

Some Things Change…

As of the final draft of this update, 81% of the AES membership have renewed for the 2011-2012 year, demonstrating commitment to support the important work of the Society for another year. Compared to the same time last year, this represents a 7% decrease in retention. This includes only 10 resigned/dropped members; two upgraded to Senior Membership and over a dozen Juniors who completed their training and upgraded to Active, Corresponding, or Professional In Epilepsy Care. This illustrates their commitment to remaining in the epilepsy field (at least) for another year. The committee remains active with further applicant groups to be approved this year. All members who are not yet renewed will be contacted personally prior to the “drop date” by members of the Membership Committee, a responsibility we have added to our job description as we become more proactive.

Bylaws Changes

The criteria with which AES Members may upgrade their member type to Senior was changed this year. The Membership Committee proposed and membership approved the following changes to the Bylaws: Members will now need to have reached their 70th birthday, and have been a supporter of AES (via paid membership) for at least fifteen consecutive years.

The Committee also submitted a proposal that was approved, clarifying the member type Professionals In Epilepsy Care (PEC) as being part of the Active member category, making it clear that PEC’s can not only sponsor new members to AES, but are also eligible for Senior Membership.

…Some Things Stay the Same

All member types paid the same dues amount as they did for 2009-2010 member year. AES staff and leadership continued working together to maintain fees while increasing the quality and value of membership. Professional Connection was added as an “electronic” benefit to members, providing access to this members-only professional networking site, easily accessed from the AES homepage. Professional Connection also facilitates the work of Committees – currently the Membership Committee has 112 postings.

AES continues to observe that submission of membership applications increase during the Annual Meeting “registration season” – roughly between August and October. Clearly, attending the Annual Meeting as an AES Member continues to attract attention of attendees as a benefit of membership.

We continue to see individuals request they be reinstated to membership after several milestones have been reached: a) October deadline for renewal for Annual Meeting registration; b) during the Annual Meeting; and c) after the meeting has ended. The committee is confident that over the next several years as the AES membership becomes used to an earlier invoicing cycle, more members will renew early and/or on time leading to increased retention rates. With the pending renewals being processed, we expect to reach a 90% retention rate by the 2011 Annual Meeting and a higher rate with the later reinstatements.

AES must be cognizant that with our current economy not all Junior members will become Active members upon completion of their training. This is an important issue to
address.

The graph below shows the breakdown of professional activities in which members indicate they are working and/or interested. This year, Sleep Medicine and Administration were added to the ever-growing list of professional areas in which our membership is working and/or training. Since members are allowed to choose more than one professional activity, the percentages listed for this statistic add up to more than 100%; reflecting these numbers relative to the total group.

**Funding Programs for Students, Residents, and Fellows**

AES President, John M (Jack) Pellock earmarked a portion of his Presidential Fund toward the sponsorship of students/residents/fellows to join as Junior Members, continuing the tradition started by AES President Steven Schachter in 2009, and continued by Jaideep Kapur in 2010. Dr. Pellock’s continued funding of these Fellows demonstrates that the AES leadership appreciates the importance of promoting Junior membership in our Society such that the next generation of practitioners will continue the AES tradition.

The **Kaufman Fund for Psychiatry in Epilepsy** continues to be available to students, residents, and fellows who are in a psychiatry or neuropsychiatry training program. As in 2010-2011, there were no new eligible applicants in the 2010-2011 membership year. More than ever, I feel strongly that our efforts to address the treatment gap in the treatment of epilepsy must also address the lack of appropriately trained psychiatrists in this field. The funds continue to be available for 2011-2012.

**The Future of AES**

AES members know how important our professional society is, and many recognize their AES membership is a bargain compared to other professional organizations for despite decreasing support for meetings, the AES has maintained unchanged membership rates. Even in these tenuous economic times the need for epilepsy research and education to attain maximal quality care will continue unabated. The AES must confirm our ongoing commitment for epilepsy research, training, quality medical care, communication and action.

In order to enhance our usually high membership retention rate, at a time when some institutions and individuals are de-prioritizing dues payments, AES membership solicitations will be expanded to all healthcare professionals involved in the treatment of epilepsy or the use of antiepileptic drugs. Two physician groups to be targeted are psychiatrists and pain specialists, for the majority of antiepileptic drugs are utilized in psychiatry and pain management, not in the treatment of epilepsy. As the majority of patients with epilepsy (PWE) have co-morbid psychiatric disorders, this is a significant component of the treatment gap in epilepsy that has not yet been addressed and must be addressed if our patients are to truly have an improved Quality of Life.

Though the primary goals of the AES concern research, education, and quality healthcare for PWE, the AES has an obligation to share its knowledge of antiepileptic drugs with those specialties that most commonly prescribe these agents. By so doing, it is hoped that the future will see collaborative research and educational efforts among these specialties.

I was most honored to carry out my responsibilities as Chair of the Membership Committee during the 2010-1011 year and especially, at the Membership Committee meeting held during the AES Annual Meeting in San Antonio. There the Membership Committee was expanded to broaden our diversity of culture, education and areas of expertise with the following members added: a) Junior Members – Drs. Leonardo Faria, Andrea Spencer, and Peter Struck; b) International member: Drs. Veronica Campanille and Alexis Arzimanoglou; c) Professionals in Epilepsy Care Members: Kelly S. Gannon, RN, CNRN, and Laxmikant Deshpande, M.Phr., PhD; d) Active Members – Drs. Jorge Burneo, Jennifer de Wolfe, Allison Spiller, Kitti Kaiboriboon, and Beth Leeman.

I look forward to chairing the next Committee meeting in Baltimore with this expanded committee. At the Baltimore committee meeting, we say goodbye to several members whose terms will expire – Joseph Drazkowski, M.D., Sanjay P. Singh, M.D., Alcy Torres, M.D., Tracey Milligan, M.D., and Vicky Whittemore, PhD. Thank you for your years of service and commitment to the AES and its membership. Further, we will name the new Vice-Chair who will become Chair of the Membership Committee become at the 2012 Annual Meeting.

Final thoughts from the Membership Committee upon reflection going forward:

1. all AES Active members can and should serve as sponsors
2. It is critical to grow the Junior membership and to have these members transfer to Active status
3. It is important that all AES member donate to the different funds to maximize the growth of the different AES Missions.

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**Report on Membership (Continued)**
Benefit for Members include:

- Members-only network allows freedom of discussion
- Blogs on current topics
- Document sharing
- Facilitates committee activities
- 24/7 availability
- Build networks
Epilepsy Currents, the official journal of the American Epilepsy Society, is entering its 11th year of publication after first appearing in September, 2001. The conceptual format of the journal remains unchanged, with a combination of commentaries on selected current articles in the peer-reviewed literature and short topical reviews. Contributing editors regularly submit articles of interest for consideration; these editors then prepare commentaries on the articles selected by the senior editors. The commentaries are designed to be insightful, critical analyses of important original research. In addition, timely reviews are solicited from experts, often individuals outside the editorial board. The journal is published bimonthly. Volume 11 of Epilepsy Currents published 10 reviews and 45 commentaries.

2011 was a year of significant changes for Epilepsy Currents. Jacqueline French, Associate Editor for Clinical Science, and formerly a long-term Contributing Editor, was elected Second Vice-President of AES and had to relinquish her editorial duties at Epilepsy Currents. Dr. Andres Kanner, Professor of Neurology at Rush University Medical Center and a former Contributing Editor of Epilepsy Currents, was selected by the Epilepsy Currents Oversight Committee after an open request for nominations and an extensive search and review. Dr. Kanner assumed his duties in mid-2011. Dr. Carl Stafstrom continues as Associate Editor for Basic Science.

In 2011, Epilepsy Currents took the major step of moving to self-publishing with the assistance of Allen Press. This step was reflected in a major redesign. With the move to self-publishing we are no longer using contractual editorial services; Cheryl-Ann Tubby coordinates the publishing effort and the senior editors have assumed more general editorial tasks. The move to self-publishing allows not only cost savings, but considerable increased flexibility. The Annual Course and the abstracts of the AES annual meeting will now be published as supplements to Epilepsy Currents.

Advertising support is solicited and accepted from all appropriate and interested parties. We now have a conflict of interest disclosure policy that uses the standard reporting form of the International Committee of Journal Medical Editors (ICJME). Solicited reviews are now peer-reviewed, either by editors of Epilepsy Currents or external reviewers when appropriate.

The print version of Epilepsy Currents is mailed to all AES members. Epilepsy Currents remains an open access journal; complete texts of all commentaries and reviews are available on PubMed Central or the AES website. Reviews and commentaries continue to be highly cited. In addition, a new website epilepsycurrents.org has been launched where one can not only access the current and past issues of Epilepsy Currents, but also submit ideas for topics you would like to see reviewed in the journal. Cheryl-Ann Tubby is coordinating this effort.
Strategic Planning
AES completed an analysis of its on-line evaluation system (Medical Education Evaluator) and was able to uncover a substantial number of topics where learners had expressed an interest in future activities. AES held four focus groups at the 2010 Annual Meeting. The groups represented Epileptologists, mixed professionals, Professionals in Epilepsy Care (PEC) and Basic and Clinical researchers. Results of these focus groups were used to create a Member Survey. The survey explored areas of interest, approaches to learning, clinical impact of our programs and outcomes sought by participants. 13% of the AES membership responded.

ABPN and MOC: AES Education Leadership met with the American Board of Psychiatry and Neurology (ABPN) in Chicago to discuss the roll out of new American Board of Medical Specialties (ABMS)/requirements, including Maintenance of Certification and the advent of the Epilepsy Certification as a subspecialty under ABPN. AES will be working on supporting members as they approach the exam in Epilepsy that is coming, including self-assessment and Performance in Practice (PIP).

Annual Meeting
NEW - CE credit added for Nursing in all symposia: CE credit for nurses on most of the annual meeting symposia is now being provided by EDUPRO Resources, LLC.

SUPPORTING EPILEPSY FELLOWS: In spite of the dwindling commercial support for the National Epilepsy Fellows and Top Scholars programs, the AES Board has formed a Task Force to look at how we can continue to support Fellows. For the 2011 Annual Meeting the AES Board has voted to use AES funds to continue to support 50 Fellows to come to the Annual Meeting.

NEW EPILEPSY SPECIALIST SYMPOSIUM: Integrating the NINDS Benchmarks, creating emphasis on translational work of research and creating opportunity for both clinical providers and researchers to collaboratively take a critical look at what is needed, AES has created a special 75th Anniversary Epilepsy Specialist Symposium.

Supplements: Supplements are in process for the 2010 Annual Course and 2010 Merritt-Putnam Symposium. Manuscript collection has been moving along and we expect to have supplements published in the first quarter of 2012.

NEW Skills Workshops: Evaluations of the meeting and the focus groups that happened at the 2010 Annual Meeting, established a clear need to have smaller, more focused intensives. We tried three Skills Workshops at the end of the 2011 Annual Meeting – Setting Up Clinical Trials, Epilepsy Surgery Update and Setting Up an EEG Monitoring Unit.

Abstracts and online availability: 2011 Abstracts were available (and citeable) on the AES website in October. Abstracts are also scheduled to be published in Epilepsy Currents in the first quarter of 2012.

Poster Tours: Poster Tours, that were very popular at the 2010 Annual Meeting continued for 2011.

ILAE Symposium: What used to be Plenary III on Tuesday at the Annual Meeting has now been renamed to the ILAE Symposium. This is a result of increased collaboration with the North American Commission and adding other commission collaborators in the future. This year’s symposium is a joint venture between the ILAE North American Commission and the ILAE Commission for European Affairs.

Educational Funding and Support
Exhibits: Under the continuing services of our exhibit managers at Corcoran Expositions the AES 2011 Exhibit Hall has recovered from the continued downsizing and exiting of a few large companies. With the added value of Innovation Pavilions and the popular Passport to Prizes program, the exhibit hall remains a viable source of product information for members.

Educational Grant Support: It is getting increasing hard to get commercial support for the AES Annual Meeting and/or educational activities. AES continues to find innovative CME activity programs that have been approved for grants.

Partnerships: A key ingredient for CME activities and for funding sources and budget savings is collaboration. AES education is stepping up collaboration by working more closely with related organizations, such as the National Association of Epilepsy Centers, the Epilepsy Foundation and the American Academy of Neurology.

CMSS Code: AES COI Committee and Board reviewed and adopted the Council of Medical Specialty Societies (CMSS) Code for Interactions with Companies in March 2011. This Code sets standards for commercial support outside of the CME requirements already in place.
Year Round Education

FDA Workshop: AES was asked to participate in a workshop that was hosted at the FDA facilities outside Baltimore. AES helped to co-sponsor the activity with AAN and the National Association of Neuropsychologists (NAN).

EMU: Enhancing Patient Safety in Epilepsy Monitoring Units: Web-based Education and Resources. The EMU Patient Safety Workgroup was developed 4 years ago. This educational program will be designed as a web-based program, whose purpose is. The National Association of Epilepsy Centers (NAEC) is a partner on this project.

PAME: Partners Against Mortality in Epilepsy. The SUDEP Task Force of the AES is planning a three-day conference June 22 – 24, 2012 in Chicago, to provide a forum for basic and clinical scientists and practitioners interested in SUDEP. Co-sponsors of the activity include the Epilepsy Foundation, CURE, Epilepsy Therapy Project. AES will provide the CME for the activity.

NAC Caribbean Congress: The North American Commission of the ILAE is holding their 3rd North American Regional Caribbean Congress on Epilepsy February 17 & 18, 2012 in Antigua. AES is providing the CME credit for the program.

Technology

Repurposing: We have repurposed the audio and slides from all of the main symposia from the Annual Meeting onto the AES website since 2004. For 2010, we added a feature that enables viewers to select individual presentations from a list. Faculty were asked to record a brief introduction to their presentation.

Website renewal: The Education Development and Web Committees have found that more and more members and others are using the AES website and, the Council on Education has obtained Board approval to develop a new educational website.

Itinerary Planner / Apps: In order to better serve the increasing members and attendees to the AES Annual Meeting, AES has tested an itinerary planner and is now looking into the possible creation of an Annual Meeting app.
In January 2011, the Institute of Medicine convened a panel of experts to consider issues of importance to the epilepsy community and to “to suggest priorities and propose strategies for dealing with barriers and gaps in knowledge that diminish the quality of life for people with epilepsy and their families”. The report is to have a domestic focus, yet identify major international issues. The emphasis will not be on biomedical research priorities, which are covered by the 2007 NINDS Epilepsy Research Benchmarks. In addition, the recommendations are to be considered within the context of the current budget climate and ongoing healthcare reform efforts.

Specific questions being asked are:

- How can the public health burden of epilepsy for patients and families be more accurately assessed?
- What priorities for future population health studies could inform treatment and prevention?
- How can the access to health and human services and the quality of care for people with epilepsy be improved?
- How can the education and training of professionals who work with people with epilepsy be improved?
- How can the understanding of epilepsy in patients and the general public be improved to create supportive communities?

These questions are being addressed in a four-point Statement of Task:

1. Public Health Surveillance, Collection & Data Integration
2. Population & Public Health Research
3. Health Policy, Healthcare & Human Services
4. Patient, Provider, & Public Education

Three public meetings were held during the first six months of 2011. The January 10 meeting in Washington, D.C. concentrated on the background and context for the study, including: the adequacy of existing epidemiological and public health surveillance data; quality of and access to care from the patient/family and provider perspectives; and what is needed to properly educate patients, providers and the public. Howard Koh, Assistant Secretary for Health, DHHS, Story Landis, Director of NINDS, and representatives of Vision 20-20, including AES members, described the issues and provided the charge to the Committee. Members of the Panel and other epilepsy experts expanded on what information is already available and what they believe is needed.

On March 21, the IOM held the first of two workshops addressing the Statement of Task, in Los Angeles. Open testimonials by patients, family members and providers began the session followed by five panels looking at Tasks #1 and #2:

- Impact of Epilepsy on Patients, Families, the Health Care System & Society (direct and indirect costs, quality-of-life and health disparities)
- Epilepsy Surveillance -- Gaps and Opportunities
- Improving Epilepsy Surveillance -- Lessons from Other Systems (cancer, autism, VA)
- Improving Epilepsy Surveillance -- Overcoming Complexities of Data Collection (definitions and classifications, co-morbidities, emerging models of data collection)
- Risk Factors and Prevention (measuring and assessing risk, strategies for primary prevention)

The final open meeting was again in Washington, DC on June 28-29, and addressed Tasks 3 & 4. The session began with public testimonies, followed by seven panels:

- Systems and Pathways of Health Care for the Epilepsies (Comprehensive Epilepsy Centers; VA Centers of Excellence; UK system)
- Health Care for the Epilepsies: Quality of Care (treatment guidelines and comparative effectiveness research; medication issues; Stroke Centers of Excellence; new models of health care delivery)
- Health Care for the Epilepsies: Access and Barriers (care coordination; Epilepsy Learning Collaborative; innovative approaches)
- Education of Health Care Professionals
- Education of Patients and Families (in health care settings; self-management; health literacy and cultural appropriateness; role of technology
- Improving Quality of Life: Community Programs and Resources
- Beyond Stigma: Public Education & Awareness Campaigns (global health programs; social marketing; advocacy; leveraging media)

Next steps:
The IOM continues to have meetings of the panel (which are closed to the public), in which they have begun the process of drafting the final report. As one of the sponsors, AES will have the opportunity to comment on the report before it is released to the public. In addition, we participate in the monthly phone calls with
IOM staff and respond to periodic requests from the Panel for additional input on specific topics.

The report is on track for a spring 2012 release of the report. It should provide a plan of action that can be used by Federal agencies (Congress, HHS, FDA, CDC, NIH) and by public advocacy groups to influence the Federal agencies.

* IOM Committee Roster
  * Mary Jane England, M.D., Chair, Regis College
  * Joan Austin, Ph.D., RN, Indiana University
  * Vicki Beck, M.S., Beck Communications
  * Charles E. Begley, Ph.D., University of Texas, Houston
  * Malachy Bishop, Ph.D., University of Kentucky
  * Lionel Carmant, M.D., University of Montreal
  * Carolyn Cocotas, RT, MPA, F-E-G-S Health & Human Services System
  * Sandra Cushner-Weinstein, PT, LCSW, Children’s National Medical Center, Washington, DC
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  * David Grant, Ph.D., University of California, Los Angeles
  * Christianne Heck, M.D., University of Southern California
  * Dale Hesdorffer, Ph.D., MPH, Columbia University
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  * Paul Jarris, M.D., M.B.A., Assn of State & Territorial Health Officials
  * Dilip Jeste, M.D., University of California, San Diego
  * Patricia Osborne Shafer, RN, MN, Beth Israel Deaconess Medical Center
  * Joseph Sirven, M.D., Mayo Clinic, Arizona
Volunteer Acknowledgment

AES appreciates its volunteers, particularly those who take on the responsibility of Chairing a Committee or Task Force. Many thanks to our 2011 Committee Chairs.
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One of the core goals of the American Epilepsy Society is advancement of research into the causes and treatment of epilepsy. To this end, the AES commits substantial resources to fund innovative proposals from all levels of the membership of the Society. These projects are funded in close collaboration with other organizations such as the Epilepsy Foundation of America, which shares the research goals of AES. Ongoing communication and cooperation between the organizations is the key to the seamless facilitation of the dozens of research projects and training fellowships launched every year in the fight to overcome epilepsy.

This year has been highlighted by numerous significant developments. The Vision 2020 group, a coalition of research organizations and epilepsy advocacy groups, has consulted extensively with the Institute of Medicine panel crafting a report on the public health impact of epilepsy, which is now in the process of generation.

One significant new program that is now operational as of this upcoming American Epilepsy Society meeting is The Grass Foundation Travelling Fellowship program, which is awarded to up to 8 meritorious trainees to help defray the costs associated with their attendance at our annual meeting. This provides these young investigators access to the latest issues in epilepsy research, with the goal of encouraging these promising researchers to make a career in epilepsy research. The Grass Foundation has a long history of working with the American Epilepsy Society to fund research into the causes and treatments of epilepsy, and this Fellowship program is the latest example of their ongoing commitment to these causes.

Within the past few months, the newly formed Translational Research Taskforce has begun considering proposals and crafting plans to help educate investigators in the specialized skills required to transform a research finding into viable clinical treatments, as well as developing research funding to enhance translational tools available to epilepsy investigators. These exciting initiatives will undoubtedly progress to tangible progress in this important aspect (and ultimate goal) of epilepsy research.
Research Funding

Oversight provided by the Research & Training Committee and its subcommittees.

AES-funded Postdoctoral Fellowships

Funded for the 2010/2011 Academic Year, administered by the Epilepsy Foundation

Kimberly Aldinger, M.D.
University of Southern California
“Epigenetic analysis in syndromic epilepsy to identify novel causal genes”

Helen Sabolek, Ph.D.
Massachusetts General Hospital
“Do GABAergic inhomogeneities determine the site of epileptic event onset?”

Kensuke Sakamoto, M.D.
The Ohio State University
“Genome-wide microRNA profiling during epileptogenesis”

Lennox & Lombroso Postdoctoral Fellowship

Hongyu Sun, M.D.
Children’s Hospital Boston and Harvard Medical School
“Dysregulation of homeostatic plasticity following early life seizures”

AES-funded Predoctoral Fellowships

Nicole Hawkins
Vanderbilt University Medical Center
“Identification of Epilepsy Modifier Genes in a Mouse Model”

Corey Keller
Albert Einstein College of Medicine of Yeshiva University
“Localizing networks with evoked potentials and resting state fMRI”

Kile Mangan
University of Wisconsin-Madison
“Thalamocortical Communication in Mice with Absence Epilepsy”

Lennox & Lombroso Predoctoral Fellowship

Izumi Toyoda
Stanford Junior University
“Where do seizures originate in a model of temporal lobe epilepsy?”

Research Initiative Fund

Funded January 2011 by AES a

Robert D. Gross, M.D., Ph.D.
Emory University
“Optogenetic Neuromodulation of the Medial Septum to Treat Epilepsy and Memory”

Research Infrastructure Program

Funded January 2011 by AES and the Epilepsy Foundation

W. Curt LaFrance, Jr., M.D., M.P.H.
Rhode Island Hospital
“Establish a Collaborative Multicenter Research Program on NES- Renewal”

Paul Rutecki, M.D.
VA Northwest Epilepsy Centers of Excellence
“Traumatic Brain Injury and Posttraumatic Epilepsy: A Prospective Study”

Research Funding (Continued)
Research Recognition Awards
Given annually to active scientists and clinicians working in all aspects of epilepsy research, this program was designed to recognize professional excellence reflected in a distinguished history of research or important promise for the improved understanding, diagnosis and treatment of epilepsy.

Award for Basic Science
Douglas A. Coull, Ph.D.

Award for Clinical Science
Tracy A. Glauser, M.D.

Distinguished Achievement Awards
Honors members for service and achievements
2010 J. Kiffin Penry Excellence in Epilepsy Care Award
Andres M. Kanner, M.D.

2010 AES Service Award
Gregory K. Bergey, M.D.

2010 William C. Lennox Award
Simon D. Shorvon, M.A., M.D., FRCP
The AES Development Campaign, Building for the Future, kicked off in 2010 and surpassed the fundraising goal of $200,000 – raising $281,458 during the fiscal year. These gifts came from a variety of sources including AES members, corporations, individual donors and bequests and foundations.

As donors to AES, it is important to know that 100% of funds raised by AES go to research and training!

In this year, AES allocated $545,000 toward research and training and here is how it was allocated:

The AES Development Council has made great strides this past year in our Building for the Future Campaign and we have sent an ambitious goal for 2011 of $750,000 to coincide with AES’ 75th anniversary.

We have been successful because, generous donors have stepped forward to underwrite our mission to promote research and education for professionals dedicated to the prevention, treatment and cure of epilepsy.

Philanthropic support for the work of AES is critical to maintaining our position as leaders in research, treatment, training and professional development. Please make your gift today.
AES Participates in Epilepsy Walk and Public Policy Institute

AES holds its spring Board meeting in Washington, DC in conjunction with the Epilepsy Foundation’s Public Policy Institute/Kids Speak Up program every year. President John M. Pellock gave the keynote talk at the annual Public Policy dinner in March and most of the Board and staff walked in the 2011 Epilepsy Walk. This year six teams made up of 128 walkers directed their funds to AES’s research funds. To learn more about AES’s research endowments, go to page 29. AES had the most walkers and it’s teams together raised the most money. The Susan Spencer/Yale Epilepsy Program team walked in memory of Susan Spencer and directed the $25,250 they raised to the Susan Spencer Fund which is will support a clinical research fellowship. Team Dreifuss raised $3,305 which were directed to the new Dreifuss endowment fund to support educational programming. Team Penry-Pellock raised $16,805 which was added to the existing Penry Fund. The New England Seizure Freedom Trail team raised $6,361. Together the six teams raised $56,026 which came back to AES to fund research and training.
Thank you to the following contributors to the AES Annual Fund, the Fritz Dreifuss Epilepsy Fund, the Rebecca Kaufman Ethical Neuropsychiatry Fund, the Lennox and Lombroso Trust, the J. Kiffin Penry Fund and the Susan S. Spencer Fund during our fiscal year July 1, 2010 through June 30, 2011. Contributors are listed alphabetically by last name within each giving category.

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- New England Seizure Freedom Trail*
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- Janice R. Raegele, Ph.D.
- Jeanne M. Nerbonne, Ph.D.
- Page B. Pennell, M.D.
- Ellyde Roko
- Brad Rosenberg
- Renata Segal-Strosselsky
- Vipul Shelat, M.D.
- Christine Shinnar, RN, M.S.N.
- Bret N. Smith, Ph.D.
- Hitten P. Zaveri, Ph.D.

*2011 Epilepsy Walk Participants
†Deceased

We have made our best attempt to carefully review all contributor lists. We apologize if we have inadvertently left anyone off the list. Please inform the AES staff if this is the case and we will correct this error for future listings.

A special thank you to all who have helped to support AES research and training programs.
Donor Recognition (Continued)

Contributor’s Circle (under $250)

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Janice M. Bue
Prior to the 2010 Annual Meeting, several of our corporate partners conducted online auctions of their equipment or services with 100% of the proceeds benefiting the Lennox and Lombroso Trust for Research & Training and the Susan S. Spencer Fund for Education and Research. The winning bids were announced during the 64th Annual Meeting in San Antonio. Here is a listing of the items that were up for bid:
The result was a total donation of $33,582 from the three company auctions. The online auction idea will be continued in the fall of 2011. One company, Nihon Kohden, has already signed on to participate.

We thank Grass Technologies, Nihon Kohden and Optima Neuroscience for their donations, and you for bidding on these items. If you know of other companies that would be interested in participating in the AES Annual Benefit Auction, or if you have questions, contact Jeff Melin at jmelin@aesnet.org.
Attendance

The vibrant city of San Antonio, TX hosted the 64th Annual AES Meeting and the 3rd Biennial North American Regional Epilepsy Congress during the first week of December. Attendance broke another record with approximately 4,300 registrations. A little more than half the attendees were AES members and from the US. Sixty-two different countries were represented at the meeting including Costa Rica, Croatia, Egypt, Iceland, Jamaica, Kuwait, Nigeria, Russia, South Africa, Uganda, Ukraine and Uruguay. The location of the meeting in Texas helped increase representation from South and Latin American Countries. Clinicians (M.D.’s) still make up the largest percentage of attendees at 40%. Other professions such as basic science researchers, nurses, nurse practitioners, physician assistants, pharmacologists, psychologists, psychiatrists, veterinarians and others make up the rest of the attendees.

Programs

Attendees were kept busy with 14 lectures and symposia, 15 investigator and clinical investigator workshops, 38 special interest groups, 27 platform sessions and 1,146 posters. All symposia offered CME with a maximum of 27 AMA PRA Category 1 Credits™ available for physicians and continuing education credits also available for nurses and pharmacists.

The most popular program with over 1,600 registered was the Presidential Symposium. Next most popular were the Annual Course and Merritt Putnam with over 1,300 registered. Topics covered a broad range of interests. The slides and audio of all of the symposia are available on the AES website. Topics covered were as follows:

• Annual Fundamentals of Epilepsy: Psychogenic Nonepileptic Seizures
• Spanish Symposium: Status Epilepticus: Novel Concepts in Pathophysiology and Treatment Strategies
• Hot Topics Symposium: From Headlines to Healthcare
• 8th Judith Hoyer Lecture in Epilepsy
• Presidential Symposium: GABAergic Transmission in Epilepsy
• AET Symposium: Channel Surfing: Impact on Treatment Strategies
• Annual Course: Inflammatory Issues and Infectious Causes of Epilepsy
• Professionals in Epilepsy Care Symposium: How Practitioners Can Use Neuropsychological Testing to Improve Patient Care and Outcomes
• Merritt Putnam Symposium: Consequences of Epilepsy Through the Ages: When is the Die Cast?
• Lennox & Lombroso Lecture: Looking Forward – Opportunities and Challenges for NINDS
• Pediatric State of the Art Symposium: Identifying and Managing the Comorbidities of Pediatric Epilepsy
• Plenary II: Neurostimulation in the Treatment of Epilepsy: The Road Traveled and the Road Ahead
• ILAE Symposium: Epilepsy Treatment in North American and Around the World: Can We Learn From Each Other?

The Scientific Program Committee accepted a total of 1,147 abstracts for presentation as posters or platforms. Twenty-seven abstract authors presented platforms and fourteen presented at the Pediatric Highlights session in addition to their poster presentations. New this year were tours of the posters guided by senior faculty. They were a great success, thanks to organizer and Scientific Program Chair, Jose Cavazos. Large crowds followed the fifteen tour leaders over the three poster sessions. The lunch break on all three days was dedicated to poster presentations, with no other programming or activities allowed.

Special Interest Groups (SIGs)

These 90-minute, member-directed discussion groups, known as SIGs, continue to be one of the most popular parts of the Annual Meeting. Thirty-eight different SIGs were presented over the five days of the meeting. Topics covered a wide range of clinical and basic science as well as behavioral areas. This year a new Social Networking Group program was offered. This was simply space for small groups to network or discuss identified topics. Several members signed up to host topic discussions and approximately 30 people participated.

Investigators’ Workshops

The Investigators’ and Clinical Investigators’ Workshops were held over three days and featured speakers from all over the world. Topics included:

• Peptidopathy, Channelopathy or Bad Network – What Causes Epilepsy in Alzheimer’s Disease?
• Copy Number Variation in the Epilepsies
• Epigenetic Mechanisms of Epileptogenesis
• The Endocannabinoid System and Temporal Lobe Epilepsy
• Mapping Brain Networks in Epilepsy: Insights From Novel EEG, fMRI and Morphometric MRI Methods
• The Emerging Role of the Axon Initial Segment in Epileptogenesis
• Neurobiological Mechanisms in Genetic Focal Epilepsies
• Insights From Neuroimaging on Brain Development in Children with “Epilepsy Only”
• “Interneuronopathies” – Diversity in the Phenotypes of...
Genetic Mutations that Alter Forebrain GABAergic Interneuron Ontogeny

- Adenosine and Epilepsy – Promising Start Into a New Century: The First Decade
- De-Standardizing Antiepileptic Therapy Development: Translating “Translational” Research Into Clinical Trials
- Control of Synapse Formation and Epileptogenesis
- Early Detection of Epileptogenesis and the Search for Preventative Treatments in Experimental Models and the Clinic
- Highlights from the Gordon Research Conference
- Endogenous Regulation of Group 1 mGluR-Mediated Epileptogenesis

Exhibit Hall and Commercial Support
The Exhibit Hall showcased 107 commercial and non-profit exhibitors and hosted lunch and snack breaks each of the three days. Exhibitors included pharmaceutical companies, device and equipment manufacturers, publishers, patient advocacy organizations, recruiters, and more. A drawing, supported by several exhibitors, was held for participants who had their ‘passport’ validated at exhibit booths. Twelve attendees received prizes such as American Express gift cards.

Three companies conducted online auctions of equipment or software to benefit the research funds this year. We thank Grass Technologies an Astro-Med, Inc. subsidiary, Nihon Kohden and Optima Neuroscience, Inc. for their assistance in raising $32,200 for the Lennox & Lombroso Trust and the Susan Spencer Fund.

New this year, were the Product Training Pavilions in the Exhibit Hall where companies had an opportunity to talk about their products to groups. This was in addition to the Scientific Exhibits which were elsewhere in the Convention Center to feature new and up and coming research of commercial entities.

Press Room
Media reports from the Annual Meeting covered a wider range of epilepsy research than the annual event had previously generated. The reporting was facilitated by a new briefing format, introduced last year, that brings journalists and researchers together in a series of informal mini-briefings scheduled throughout the meeting.

This year’s media briefings included 17 research reports and information from two symposia. The series provided reporters an opportunity to hear from 25 investigators associated with the research. Topics ranged from an epidemiological study of SUDEP to animal studies on neurogenesis and neuroprotection, and human to animal neuronal progenitor cell transplants.

There was in addition a special media briefing to announce the multi-organizational sponsorship and pending launch of the National Institute of Medicine (IOM) study of epilepsy that began last January. Presenters for the briefing were AES 1st Vice President Frances E. Jensen, M.D., Story C. Landis, Ph.D., Director, NINDS, and Carmita Vaughan, CEO for CURE. AES leadership is looking to the possibility that at least some of the IOM’s findings and recommendations might be available for discussion at the forthcoming AES Annual Meeting in Baltimore.

The AES media briefings serve to disseminate information of potential interest and value to clinicians, and to raise awareness of the progress and scope of epilepsy science as a backdrop for increasing support of epilepsy research. The Society also works with the media throughout the year, frequently connecting reporters with AES members who provide expert comment on published research reports and issues of concern to the epilepsy community.
The American Epilepsy Society would like to recognize the Annual Meeting and year round support of the following corporate partners:

2010 Annual Meeting & Year Round Support

**LEADERSHIP LEVEL**
($250,000 – $500,000)
- **Pfizer Inc.**
  ILAE Symposium; PEC Symposium; National EpiFellows Awards; Exhibit Booth.
- **UCB, Inc.**
  Hot Topics Symposium; Merritt-Putnam Symposium; Annual Course; Itinerary Planner; two Program Book ads; President’s Reception; Nurse Awards; Young Investigator Awards; Scientific Exhibit; Exhibit Booth.

**PARTNER LEVEL**
($100,000 – $249,999)
- **GlaxoSmithKlein**
  The AES Annual Meeting; Exhibit Booth.
- **Sunovion Pharmaceuticals Inc**
  AET Symposium; an all day Scientific Exhibit; two Special Interest Groups; lunch in the Exhibit Hall; Exhibit Booth.

**SUPPORTER LEVEL**
($50,000 – $99,999)
- **Eisai Inc.**
  Program Book ad; Merritt-Putnam Symposium; Scientific Exhibit; Exhibit Booth.
- **Lundbeck**
  Cyber Café in Exhibit Hall; Scientific Exhibit; two Special Interest Groups; Exhibit Booth; Product Training Pavilion.

**CONTRIBUTOR LEVEL**
($25,000 – $49,999)
- **Cyberonics, Inc.**
  Plenary II Symposium; Scientific Exhibit; Exhibit Booth.
- **Medtronic, Inc**
  Junior Investigator Awards; Scientific Exhibit Booth.
- **Nihon Kohden America, Inc.**
  Auction of Video EEG for Lennox and Lombroso/Susan Spencer Research Trusts; Exhibit Booth.
- **Questcor Pharmaceuticals, Inc.**
  Special Interest Group; Scientific Exhibit; Exhibit Booth.

**ASSOCIATE LEVEL**
($10,000 – $24,999)
- **Analyze Direct**
  Exhibit.
- **Care Fusion**
  Exhibit Booth.
- **Compumedics Limited**
  Exhibit Booth.
- **Elekta**
  Exhibit Booth.
- **Grass Technologies**
  Auction of Video EEG for Lennox and Lombroso/Susan Spencer Research Trusts; Exhibit Booth.
- **Natus Medical**
  Exhibit Booth.
- **Novartis Pharmaceuticals Corporation**
  Product Training Pavilion; Exhibit Booth.
- **PMT Corporation**
  Exhibit Booth.

**ADVOCATE LEVEL**
($10,000 – $24,999)
- **Ad Tech Medical Instrument Corp.**
  Exhibit Booth.
- **Blackrock Microsystems**
  Exhibit Booth.
- **Cadwell Laboratories**
  Exhibit Booth.
- **Electrical Geodesics, Inc.**
  Exhibit Booth.
- **Epilepsy Foundation**
  Exhibit Booth.
- **Optima Neuroscience**
  Auction of EEG Review Software License IdentEvent™ for Lennox and Lombroso/Susan Spencer Research Trusts; Exhibit Booth.
- **PMT Corporation**
  Exhibit Booth.

**PATRON LEVEL**
($5,000 – $9,999)
- **Ad Tech Medical Instrument Corp.**
  Exhibit Booth.
- **Blackrock Microsystems**
  Exhibit Booth.
- **Cadwell Laboratories**
  Exhibit Booth.
- **Electrical Geodesics, Inc.**
  Exhibit Booth.
- **Epilepsy Foundation**
  Exhibit Booth.
- **Optima Neuroscience**
  Auction of EEG Review Software License IdentEvent™ for Lennox and Lombroso/Susan Spencer Research Trusts; Exhibit Booth.
- **PMT Corporation**
  Exhibit Booth.
OTHER ANNUAL MEETING EXHIBITORS

The Annual Meeting of the American Epilepsy Society is designed as a forum for the exchange of ideas among professionals and brings together those engaged in the research and treatment of epilepsy. Meeting attendees welcome the opportunity to meet with exhibitors and learn how products and services can aid their research or treatment of epilepsy.

| Ad-Tech Medical Instrument Corporation | Intractable Childhood Epilepsy Alliance (ICE) |
| AED Pregnancy Registry | John Libbey Eurotext Ltd. |
| The American Board of Clinical Neurophysiology, Inc. (ABCN) | LGS Lennox-Gastaut Syndrome) Foundation |
| American Board of Registration of Electroencephalographic and Evoked Potential Technologists, Inc. | Lippincott Williams & Wilkins |
| AnalyzeDirect Inc. | Lundbeck, Inc. |
| The Anita Kaufmann Foundation | Meda Pharmaceuticals Inc. |
| Athena Diagnostics, Inc. | National Association of Epilepsy Centers |
| Blackrock Microsystems | Natus Medical Incorporated |
| Brain Vision LLC | Neuralynx, Inc. |
| Cadwell Laboratories, Inc. | neuroConn GmbH |
| CareFusion (formerly Cardinal Health) | NeuroNexus Technologies |
| Child Neurology Foundation (CNF) | NeuroTrax |
| Citizens United for Research in Epilepsy | Neurovirtual USA, Inc. |
| Clever System, Inc. | The New York Times |
| CNS Vital Signs | Nihon Kohden America, Inc. |
| Cochrane Epilepsy Group | NINDS – National Institute of Neurological Disorders and Stroke |
| Compumedics USA | Northeast Regional Epilepsy Group |
| Cyberonics , Inc. | Novartis |
| Data Sciences International | Nutricia North American |
| Demos Medical Publishing, Inc. | Optima Neuroscience |
| DigiTrace EEG Services | Oxford University Press |
| Dixi Medical | Pfizer Inc. |
| Eisai, Inc. | Pinnacle Technology, Inc. |
| Electrical Geodesics, Inc. | PMT Corporation |
| ELEKTA, Inc. | Questcor Pharmaceuticals, Inc. |
| Elsevier, Inc. | Rhythmlink International |
| Emfit Corp. | Ripple LLC |
| Epilepsy Foundation | Rochester Electro-Medical, Inc. |
| Epilepsy Phenome/Genome Project | Seizure Tracker |
| Epilepsy Therapy Project | Smart Monitor Corp |
| www.EpilepsyCongress.org | South Texas Comprehensive Epilepsy Center |
| GeneDx | Sunovion Pharmaceuticals Inc. |
| GlaxoSmithKline | Supernus Pharmaceuticals, Inc. |
| Global Neuro-Diagnostics, LP | SynapCell |
| Integra LifeSciences Corporation | Triangle BioSystems, Inc. |
| International Dravet Syndrome Epilepsy Action (IDEA) League | Tuberous Sclerosis Alliance |
| | Tucker-Davis Technologies |
| | UCB, Inc. |
| | Wiley-Blackwell |
2012
AMERICAN EPILEPSY SOCIETY
65TH ANNUAL MEETING
4TH BIENNIAL NORTH AMERICAN REGIONAL EPILEPSY CONGRESS

SAN DIEGO, CA
CONVENTION CENTER
November 30 – December 4, 2012

MEETING HIGHLIGHTS
- CME Symposia and Lectures
- Platform Sessions
- Poster Sessions
- Commercial Exhibits
- Special Interest Group Meetings

Future Annual Meeting Dates

2013
Washington, D.C.
Washington Convention Center
December 6 – 10

2014
Seattle, WA
Washington State Convention and Trade Center
December 5 – 9

2015
Philadelphia, PA
Pennsylvania Convention Center
December 4 – 8

2016
Houston, TX
George R. Brown Convention Center
December 2 – 6