Impact of Surgery on Lives of People with Epilepsy

Embargoed for release until 9:00 AM (EST), December 8th

Washington, D.C., December 8, 2013 - Resective surgery is an effective treatment for drug-resistant epilepsy. To investigate the effect of epilepsy surgery on patients lives, researchers from the Henry Ford Comprehensive Epilepsy Program (HECEP) in Michigan conducted a retrospective study with long-term follow up of surgical patients and correlated post-surgical psychosocial outcomes with seizure outcome and brain area surgically resected.

In research presented today at the American Epilepsy Society 67th Annual Meeting, Marianna Spanaki-Varelas, MD, the co-investigator and Epilepsy division head, HFCEP, reported that telephone interviews were conducted with more than half of all epilepsy surgery patients operated on at their center between 1993 and 2011. Of those contacted, 215 had undergone temporal lobe surgery and 38 had surgery in other brain areas. (Poster 3.249 / Abstract 1749424 – Long-term Post-operative Psychosocial Outcomes after Resective Surgery for Epilepsy.)

More than three–fourths of temporal lobe resection patients (78%) had a favorable surgical outcome (seizure free or having only rare disabling seizures), and over half of extra-temporal surgical patients (58%) had a similar outcome. Almost all of the patients (92%) considered the surgical treatment to have been worthwhile.

“Our study shows that resective epilepsy surgery not only yields favorable seizure outcomes but psychosocial outcomes, as well,” says Vibhangini S. Wasade, MD, staff neurologist at Henry Ford Hospital and lead author of the study. “Following surgery, more patients were able to drive, and those with favorable seizure outcomes were more likely to be employed full-time and less likely to be taking antidepressants. Overall, the great majority expressed satisfaction in having epilepsy surgery.”

Half of the surgical patients (51%) were able to drive at the time of the survey, compared to 35% who were able to do so preoperatively. Patients with a favorable surgical outcome were more likely than those with less favorable outcomes to be currently driving (65% vs. 11%), more likely to be currently working (28% vs. 8%), and less likely to be taking antidepressant medication (24% vs. 47%). The other co-investigators of this study are Jason Schwalb, MD, Rizwan Tahir, MD and Lonni Schultz, PhD, from Henry Ford Hospital, and Kost Elisevich, MD, and Brien Smith, MD, from Spectrum Health Systems, Michigan.
Editors Note: Authors of this study will be available at a press briefing at 9:00 am (EST), December 8, in the onsite pressroom, Room 209-A, Level 2 of the Walter E. Washington Convention Center. The call-in number for off-site journalists is 1-605-475-4000, passcode 521653#.

About epilepsy
The epilepsies affect 50 million people worldwide, including three million in the United States. The disorder can have a single specific, well-defined cause, such as a head injury, or manifest as a syndrome with a complex of symptoms. It is the third most common neurological disorder after Alzheimer’s disease and stroke.

About the American Epilepsy Society (AES)
The American Epilepsy Society, based in West Hartford, Conn., seeks to advance and improve the treatment of epilepsy through the promotion of epilepsy research and education for healthcare professionals. The Society’s annual meeting is the largest scientific meeting in epilepsy and each year attracts some 4,000 physicians, scientists and allied healthcare professionals from around the world.

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