USF UNIVERSITY OF SOUTH FLORIDA

TGH Tampa General Hospital

Comprehensive Epilepsy Program

http://epilepsy.usf.edu

Epilepsy Surgery in 2013

A total of 42 surgeries were performed in 2013, resulting in the following outcomes:

- 80% seizure free
- 10% improved but not seizure free
- 10% not significantly improved
- 0% worse
- No significant complications

Contact information
(available and accessible)

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Recent Publications

• Park MS, Nakagawa E, Schoenberg MR, Benbadis SR, Vale FL. Outcome of corpus callosotomy in adults. Epilepsy Behav. 2013;28:181-4.

• Lau T, Miller T, Klein T, Benbadis SR, Vale FL. Temporal lobe surgery in medically refractory epilepsy: A comparison between populations based on MRI. Seizure 2014;23:20-4.

• Waseem H, Raffa SJ, Benbadis SR, Vale FL. Lead revision surgery for VNS in epilepsy: Outcomes and efficacy. Epilepsy Behav 2014 Jan 2;31C:110-113.

• Vale FL, Bozorg AM, Schoenberg MR, Wong K, Witt TC. Long-term radiosurgery effects in the treatment of temporal lobe epilepsy. J Neurosurg. 2012 Nov;117(5):962-9.

• Vale FL, Effio E, Arredondo N, Bozorg A, Wong K, Martinez C, Downes K, Tatum WO, Benbadis SR. Efficacy of temporal lobe surgery for epilepsy in patients with negative MRI for mesial temporal lobe sclerosis. J Clin Neurosci 2012;19:101-6.

• Benbadis SR. Mental heath organizations and the ostrich policy. Neuropsychiatry 2013;1:5–7.

• Benbadis SR. Just like EKGs! Should EEGs undergo a confirmatory interpretation by a clinical neurophysiologist? Neurology 2013;80(Suppl 1):S47-51.

• Kaplan P, Benbadis SR. How to write an EEG report. Neurology 2013;80(Suppl 1):S43-46.

• Schoenberg MR, Marsh PJ, & Benbadis SR. Where are somatoform disorders going? An update on the DSM-V. Expert Review of Neurotherapeutics 2012;12:1371-1374.

• Benbadis SR. Behavioral and psychogenic events. Continuum (AAN, Minneap Minn) 2013 Jun;19(3 Epilepsy):715-29.

• Frontera AM, Haley JA. Classification of Seizures and Epilepsy Syndromes. In: Husain AM, Tran TT, editors. Department of Veteran Affairs Epilepsy Manual. Publisher pending; 2014:3-23.

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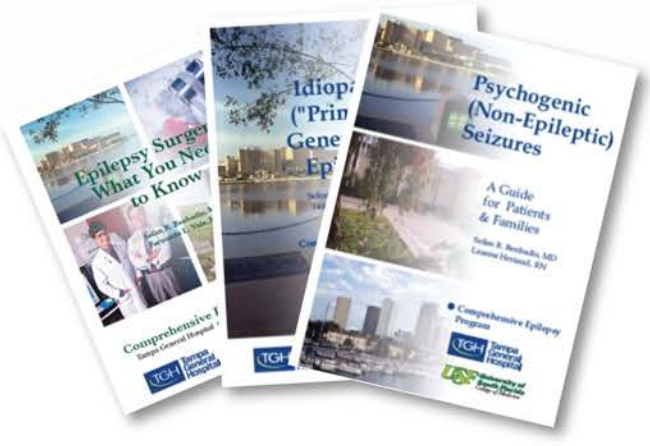

Patient Education

• Available at http://epilepsy.usf.edu
• Understanding seizures and epilepsy
• Psychogenic seizures (English & Spanish)
• Epilepsy surgery (English & Spanish)
• Idiopathic generalized epilepsy (English & Spanish)

A typical surgery success story: Kimberly

In her own words:

"Thank you so much for your encouragement to have a craniotomy. I was so apprehensive about it but because of my epilepsy I could not drive and work was very difficult because of my memory problems and auras. Since the surgery, my memory has improved, I am taking less medication and I have not had any auras or seizures in 2 years! The surgery was a miracle, I was in the hospital for only one night! I had very few headaches afterwards, used a painkiller for just a few weeks and only took ibuprofen as needed after that. The scar is invisible, my confidence has improved and I couldn't be happier with the results. I would definitely encourage other candidates to have the procedure, it saved my life. "

Kim was 24 year-old when she presented to us in 2011. Her seizures started in 2003 after a viral encephalitis, and quickly became uncontrolled despite medications. Interictal EEG showed right temporal sharp waves, maximum at T4-F8. Ictal recordings: 9 seizures were recorded. Clinically, she had her aura (nausea or fear or deja vu), left upper extremity dystonic posturing and left facial clonic activity, oral automatisms, and at times ictal speech. On EEG, there was a right temporal rhythmic ictal pattern (sharp theta) with evolution. MRI showed an extensive right temporo-occipital lesion (gliosis). PET scan shows right hemisphere hypometabolism.

The conclusion was that she had neocortical focal epilepsy arising from the right temporo-occipital region, secondary to an area of gliosis. In December 2011, she had a focal resection assisted with intraoperative electrocorticography.

Meet our Research Coordinator: Tara McTigue, RN

- Tara obtained her RN at St Petersburg College in 2001
- She became a Certified Clinical Research Coordinator in 2003.
- Tara has coordinated multiple industry-sponsored and investigator-initiated studies in multiple therapeutic areas including; DVT prophylaxis, Kidney Transplant, Liver Transplant, Hepatitis C, Epilepsy & Stroke.
- In 2011, she joined USF's Neurology team.

Clinical Trials

Completed in 2012-2013

- Eslicarbazepine
- Intravenous carbamazepine
- Brivaracetam
- Vimpat for IGE
- Perampanel for IGE
- Sabril Vision Study

Ongoing for 2014

- Midazolam Intranasal Spray
- Automatic Magnet Mode VNS Therapy

Tennis Anyone?
Dr. Benbadis's Ranking

- USTA (www.usta.com)
  - Mens 50s Division
- Year 2012
  - Florida #1
  - National #22
- Year 2013
  - Florida #2
  - National #12

This Newsletter is sponsored in part by

RSC Diagnostic Services
Expert Solutions for Better Health.

...partner with USF Comprehensive Epilepsy Program

RSC Diagnostic Services is a premier EEG solutions provider. We deliver custom EEG programs built to the specific needs of physician practices and acute care facilities. RSC's unique services improve patient care by increasing the diagnostic yield and accuracy to evaluate and diagnose seizures.

Why RSC?

Real-Time Review:
RSC Diagnostics offers advanced acquisition software that allows real-time access during the live EEG. We are able to insure the quality of the data by detection and correction of issues to improve the diagnostic yield while promoting a positive patient experience.

Quality:
Our clinical staff has one goal in mind when it comes to achieving a quality Ambulatory EEG and that is to be as good as if not better than an Epilepsy Monitoring Unit. Our Technologists go through extensive training and continuous education to produce clean EEG data for your interpretation. We want reading 72 hours or more of EEG data to be painless!

Tailored Data Analysis:
Our Certified Long Term Monitoring Technologists (CLTM) and Registered EEG Technologists (R. EEG T.) analyze, annotate, and write reports for the completed EEGs. Our Scanning Technologists review all of the recorded data, patient diaries, and clinical notes to create a high quality report.

Custom EEG Programs:
RSC can customize our services to meet the unique needs of your practice or facility. Our customizable programs offer Routines EEG's solutions, In-Home Ambulatory EEG's, as well as Marketing your EEG programs.

Email about a custom program for your practice or facility today at info@rscdiagnosticservices.com
or call Todd Jackson at 615.300.3324.