Epilepsy Snapshot! The Provincial Guidelines for the Management of Medically-Refractory Epilepsy in Adults and Children who are not candidates for Epilepsy Surgery

- ✓ Epilepsy affects around 95,000 Ontarians (<u>Ng et al. 2015</u>).
- ✓ Each year an estimated 6,500 Ontarians will develop epilepsy, and 1,950 (approximately 30%) will have a type that cannot be controlled by seizure medication, referred to as medically-refractory epilepsy (<u>Tellez-Zenteno et al. 2004</u>; <u>Wiebe et al. 1999</u>).
- ✓ Surgical intervention may result in eliminating seizures. However, approximately one third of the individuals diagnosed with medically-refractory epilepsy will not be considered candidates for surgery after assessment, as they would not benefit from it (HQO 2012).
- ✓ Epilepsy surgery should never be considered a last resort for any adult or child with medically refractory epilepsy (<u>Jette et al. 2014</u>; <u>Ibrahim et al. 2014</u>)
- ✓ There is limited evidence on the management of medically-refractory epilepsy. A number of factors may predict whether epilepsy is refractory, including type of epilepsy, underlying syndrome, etiology, seizure frequency, density and clustering, environmental factors and genetic factors affecting anticonvulsant pharmacodynamics (French 2007; Mohanraj and Brodie 2006).
- ✓ The Ministry of Health and Long-Term Care (MOHLTC) established the Epilepsy Implementation Task Force (EITF) to implement epilepsy system improvements. The <u>Provincial Guidelines for the Management of Medically-Refractory Epilepsy in Adults and</u> <u>Children Who are not Candidates for Epilepsy Surgery</u> have been developed to guide evidence-based practice for Ontario healthcare providers who provide care for patients with medically-refractory epilepsy.
- ✓ Key areas of focus in this guideline are antiepileptic drugs, immunotherapy, diet, neurostimulation and non-pharmacological considerations.
- ✓ All individuals with medically-refractory epilepsy should be referred to a District Epilepsy Centre (DEC) or Regional Epilepsy Surgery Centre (RESC) to receive thorough assessment and individualized treatment. Therapies described in this guideline (<u>Provincial Guidelines</u> <u>for the Management of Medically-Refractory Epilepsy in Adults and Children Who are not</u> <u>Candidates for Epilepsy Surgery</u>) may be used in combination and under the care of a multidisciplinary care team, co-managed with the individual's Primary Care Provider.

Please refer to the Epilepsy Surgery Patient Pathway on Page 2...



Epilepsy Surgery Patient Pathway



