

SEIZURE DISORDERS

OUTCOME OF CHILDHOOD EPILEPSY

Factors predictive of remission of epilepsy were evaluated in 504 patients followed for an average of 7 years at the Departments of Pediatrics and Mathematics, Dalhousie University and Children's Hospital, Halifax, Nova Scotia, Canada. At the end of follow-up, 55% of the total cohort were off medication and in remission. Approximately 70% of those stopping medication remained seizure free. At the time of diagnosis, the best predictors of remission, determined by a multivariate analysis scoring system, were 1) age <12 years at onset, 2) normal intelligence, 3) no prior neonatal seizures, and 4) fewer than 21 seizures before treatment. Prediction was improved after 12 months follow-up, when a score for the seizure frequency between 6 and 12 months was included. Patients with absence and minor motor seizures were excluded from the study. Seizure type and the EEG were not of predictive value. (Camfield C, Camfield P et al. Outcome of childhood epilepsy: A population-based study with a simple predictive scoring system for those treated with medication. J Pediatr June 1993; 122: 861-868). (Reprints: Carol Camfield MD, IWK Children's Hospital, Box 3070, Halifax, Nova Scotia B3H 3G9, Canada).

COMMENT. During the study period, 1977-1985, the number of seizure-free years required before medication withdrawal was attempted changed from 4 to 2 years. The authors endorse the stopping of medication after 2 seizure-free years, regardless of the predicted prognosis.

A social outcome of epilepsy study in 337 intellectually normal children included in this Nova Scotia population found school failure in 34%, mental health consultation in 22%, psychotropic medication used in 5%, unemployment 20%, and criminal conviction in 2%. Learning disorders and more than 21 seizures before treatment for epilepsy were predictive of an unfavorable social outcome, but seizure control and EEG were non-predictive. (Camfield C, Camfield P et al. J Pediatr June 1993; 122: 869-873).

CARBAMAZEPINE AND SERUM LIPID LEVELS

The effects of carbamazepine on serum lipid levels in 36 previously untreated patients with recently diagnosed idiopathic epilepsy were evaluated in a 1 to 5-year follow-up study at the Departments of Neurology and Clinical Chemistry, University of Oulu, Finland. Serum cholesterol, high-density lipoprotein (HDL) cholesterol, and g-glutamyltransferase (GGT) levels increased after 2 months' carbamazepine treatment and remained high after 1 and 5 years follow-up. Cholesterol/HDL cholesterol ratios remained unchanged. Serum low-density lipoprotein (LDL) cholesterol and triglycerides (TG) increased during the first year but were normal after 5