

Majority of epilepsy surgery patients enjoy improvement in their physical and social wellbeing

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The majority of epilepsy patients who have brain surgery to treat their disorder are satisfied with the results in reducing epilepsy-related seizures and improving their psychological and social well-being.

Those were the conclusions of a new study by Henry Ford Hospital researchers who examined the medical records of <u>epilepsy</u> surgery patients and conducted a telephone survey to determine their satisfaction with the results of the procedure.

"Overall, the great majority of patients, 92 percent of them, expressed satisfaction with undergoing epilepsy surgery," says Vibhangini S. Wasade, M.D., a Henry Ford Hospital neurologist 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 antidepressant medication," Dr. Wasade adds.

The research will be presented at the American Epilepsy Society's 67th Annual Meeting in Washington, DC, by Marianna Spanaki-Varelas, M.D., the study's co-author and division head of the Henry Ford Comprehensive Epilepsy Program.

Each of the patients in the study group underwent resective surgery, in



which the affected portion of their brain is removed, to treat refractory partial epilepsy. Refractory epilepsy, which affects about a third of those with the <u>seizure disorder</u>, is a form that resists treatment with medications.

The condition can severely damage patients' quality of life, leaving them wary of their next unpredictable seizure, limiting their ability to work full-time or successfully attend school and sometimes causing seizure-related injuries.

In such cases, resective surgery is considered an effective treatment. The most common procedure – temporal resection – involves removing the affected portion of the temporal lobe.

In other instances, seizure surgery is extra-temporal, in which a portion of the brain outside the temporal lobes – including the frontal, parietal or occipital lobes – is removed.

Henry Ford researchers used its databases to identify patients who had epilepsy surgery from 1993 to 2011. Of those 420 patients, 253 were surveyed by telephone to determine their current seizure frequency, driving status, employment status and use of antidepressants.

Of the 253 patients surveyed:

- 82 patients (32 percent) were <u>seizure</u> free, and 189 (75 percent) had a favorable outcome.
- Temporal resection was performed on 215 patients (85 percent) of the study group, with significant favorable outcomes.
- Patients were more likely to be driving compared to before their <u>surgery</u> (51 percent versus 35 percent).
- The difference in current full-time employment status was significantly higher in temporal resections compared to extra-



temporal – (45 percent versus 26 percent).

Patients with favorable surgical outcomes were more likely to be driving (65 percent versus 11 percent), employed – (28 percent versus 8 percent), and less likely to be taking anti-depressants – (24 percent versus 47 percent), compared to those without favorable outcomes.

Provided by Henry Ford Health System

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