

Mixed myoclonic-absence status epilepticus in juvenile myoclonic epilepsy

Philippe Gélisse, Arielle Crespel

Epilepsy Unit, Hôpital Gui de Chauliac, Montpellier
Research Unit URCMA (Unité de recherche sur les comportements et mouvements anormaux), INSERM, U661, Montpellier, France

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ABSTRACT – Myoclonic status epilepticus or mixed absence-myoclonic status is uncommon in juvenile myoclonic epilepsy (JME), often precipitated by sleep deprivation, withdrawal of medication, or inadequate antiepileptic drugs (Thomas *et al.*, 2006; Crespel *et al.*, 2013). Such episodes respond well to benzodiazepines or valproate (Crespel *et al.*, 2013). We present the video-EEG of a 24-year-old woman with JME and bipolar disorder. She had a confusional state five days after withdrawal of clonazepam (14 mg/d) and introduction of oxazepam (200 mg/d), followed by catatonic stupor with subtle myoclonus of the face and the arms. The EEG showed absence status (*figures 1, 2*), which stopped after IV injection of clonazepam (1 mg) (*figure 3*). Consciousness returned to normal [*Published with video sequence and figures*¹].

Key words: status epilepticus, juvenile myoclonic epilepsy, absence seizure

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References

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Correspondence:

Philippe Gélisse
Epilepsy Unit,
Hôpital Gui de Chauliac,
80 avenue Fliche,
34295 Montpellier cedex 05,
France
<p_gelisse@hotmail.com>

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¹Available on www.epilepticdisorders.com

Legend for video sequence

Video sequence

Absence status. The patient is unable to follow orders (e.g. “close your eyes”). She has subtle myoclonic jerks of the arms.

End of the status epilepticus after injection of clonazepam IV (1 mg). The level of consciousness is normal and when asked if she has a boyfriend, she laughs.

Key words for video research on www.epilepticdisorders.com

Phenomenology: status epilepticus (non convulsive); absence (dialeptic) seizure; myoclonic seizure

Localization: not applicable

Epilepsy syndrome: juvenile myoclonic epilepsy

Etiology: unknown