

Refractory chronic epilepsy associated with neuronal auto-antibodies: could perisylvian semiology be a clue?

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Key Points

1. The diagnosis of chronic autoimmune epilepsy should be considered in cases of medically refractory, lesion-negative epilepsy with perisylvian semiology.
2. Autoimmunity should also be considered in cases in which EEG abnormalities occur in the mid temporal region, unusual electrographic features are present, and the patient has a history of head injury and comorbid depression or other autoimmune conditions.
3. The link between perisylvian semiology and autoimmunity is possibly related to the insula, its many functions and high connectivity, or its role in immune function.