Seminar in Epileptology

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Concept of epilepsy surgery and presurgical evaluation

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Objectives of presurgical evaluation

- Epilepsy surgery can eliminate seizures in selected patients with drugresistant epilepsy.
- The success of the epilepsy surgery depends upon selection of ideal surgical candidates using a presurgical evaluation process.
- Two basic aims of the presurgical evaluation are:
 - Localization of the epileptogenic zone and its extent.
 - Ensure its complete and safe removal without causing neurocognitive or motor deficits.
- Presurgical evaluation is a multimodality approach
 - Each modality provides unique and complimentary information
 - No modality can provide absolute information
 - Concordance between different modalities is the key to success



Presurgical evaluation strategies

- The basic modalities for presurgical evaluation are clinical history, MRI and long-term video-EEG monitoring.
- Additional tests include ictal SPECT, interictal PET, functional MRI, magnetic and EEG source imaging, and intracranial monitoring.
- Additional tests are required depending upon the complexity of the case
- The commonest surgically remediable syndromes are hippocampal sclerosis, focal cortical dysplasia, and benign neoplasms
- A close collaboration between different disciplines and teamwork is
 essential for a successful epilepsy surgery program



Comprehensive Epilepsy Care:



Presurgical Evaluation





Rathore and Radhakrishnan, 2015 Presurgical evaluation: Step-wise approach **ETLE/ Normal MRI** STAGE 3 ICM **Eloquent lesions** CSM **TLE/Normal MRI** STAGE 2 SPECT, PET **Functional MRI BL MTS Clinical history** Non-eloquent lesion MRI STAGE 1 **UL MTS** V-EEG ICM – Intracranial monitoring; er CSM – Cortical stimulation and mapping;

UL – Unilateral; BL - Bilateral

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Presurgical evaluation



Success of epilepsy surgery depends upon the accuracy of localization during the pre-surgical evaluation process and the completeness of resection of the epileptogenic zone





An algorithm depicting the process of pre-surgical evaluation Epileptic and selection for surgery