

Ictal asystole with intercurrent cardiopathy: a complex combination leading to delayed diagnosis

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SUMMARY

- Intercurrent cardiopathy may misorient asystole diagnosis.
- Prolonged video-EEG with at least two paroxysmal events recorded is crucial for an accurate diagnosis of ictal asystole.
- EEG diagnosis in IA cases requires a careful review of early changes.
- Ictal bradycardia is significant for the diagnosis.
- Although IA is usually self-limiting, a continuous video-EEG should be performed early for the diagnosis in order to avoid SUDEP.