

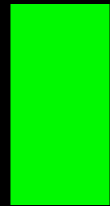
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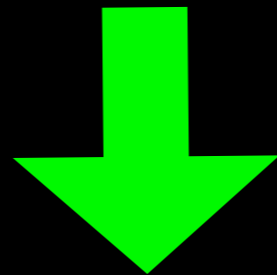
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Short communication

Risk factors of recurrent seizure, co-morbidities, and mortality in new onset seizure in elderly

Kanitpong Phabphal^{a,*}, Alan Geater^b, Kitti Limapichat^a, Pornchai Sathirapanya^a, Suwanna Setthawatcharawanich^a

^aNeurology Unit, Department of Medicine, Faculty of Medicine, Prince of Songkla University, Hat Yai, Songkhla 90110, Thailand
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ABSTRACT

Objective: To determine the risk factors of seizure recurrence and the most common comorbidities in elderly patients with epilepsy.

Method: We did a retrospective study of 278 patients older than 65 years with first seizure. We evaluated electrolytes, blood glucose, urea and creatinine levels, and performed electrocardiography (ECG), and routine electroencephalogram (EEG) on all patients. We evaluated seizure recurrence and comorbidities at 2 years.

Results: Univariate analysis found that significant ($P < 0.05$) factors affecting seizure recurrence were etiology of seizure, EEG, and status epilepticus at first presentation. In multivariate regression analysis, etiology of seizure and EEG were significant statistical factors in seizure recurrence at 2 years follow up. Age, sex, duration of time between first seizure and diagnosis of seizure, seizure type, misdiagnosis of non-epileptic seizure, and use of antiepileptic drugs were not significant factors for predicting seizure recurrence. Depression and anxiety were the most common comorbidities in our study, followed by sleep-related disorders and stroke. There were no statistically significant differences in comorbidities between patients who remained seizure free and patients who had recurrent seizure.

Conclusion: Most of the new onset seizures in our elderly patients were focal onset. Acute symptomatic etiology, remote symptomatic etiology, progressive symptomatic etiology and abnormal EEG features were powerful predictors of seizure recurrence, and mood disorder, sleep disorder and stroke were the common comorbidities.

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VOL. 10, No. 3
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Bone mineral density following long-term use of antiepileptic drugs in a tropical Asian country

Kanitpong Phabphal, Kitti Limapichat, Ponchi Sathirapanya, Suwanna Setthawatcharawanich, Rattana Leelawattana, Natawan Thammakumpee, Atchara Thamaprasit, Alan Geater

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Bone mineral density following long-term use of antiepileptic drugs in a tropical Asian country

Kanitpong Phabphal¹, Kitti Limapichat¹, Ponchi Sathirapanya¹, Suwanna Setthawatcharawanich¹, Rattana Leelawattana², Natawan Thammakumpee², Atchara Thamaprasit², Alan Geater³

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Bone 45 (2009) 232–237

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Prevalence and risk factors of low bone mineral density and 25-hydroxyvitamin D status in young healthy epileptic adult patients in a tropical Asian country taking antiepileptic drug

Kanitpong Phabphal ^{a,*}, Alan Geater ^b, Rattana Leelawattana ^c, Ponchi Sathirapunya ^a, Suwanna Sattawatcharawanich ^a, Kitti Limapichat ^a

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FULL-LENGTH ORIGINAL RESEARCH

The association between *Bsm1* polymorphism and bone mineral density in young patients with epilepsy who are taking phenytoin

*Kanitpong Phabphal, †Alan Geater, *Kitti Limapichart, *Pornchai Sathirapanya,
*Suwanna Setthawatcharawanich, *Natthawan Witeerungrot,
‡Natawan Thammakumpee and ‡Ratana Leelawattana

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The association between BsmI polymorphism and risk factors for atherosclerosis in patients with epilepsy taking valproate

Kanitpong Phabphal^{a,*}, Alan Geater^b

^a Neurology Unit, Department of Medicine, Faculty of Medicine, Prince of Songkla University, Hat Yai, Songkhla 90110, Thailand

^b Epidemiology Unit, Faculty of Medicine, Prince of Songkla University, Hat Yai, Songkhla 90110, Thailand

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Clinical characteristics, etiology and long-term outcome of epilepsia partialis continua in adult patients in Thailand
Phabphal, K., Limapichat, K., Sathirapanya, P., Setthawatcharawanich, S., Geater, A.
Epilepsy Research
volume 100, issue 1-2, year 2012, pp. 179 - 187

has been cited in:



[Etiology, clinical features and outcome of epilepsia partialis continua in cohort of 51 children](#)
Kravljanc, R., Djuric, M., Jovic, N., Djordjevic, M., Zamurovic, D., Pekmezovic, T.
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SPECIAL ISSUE

New Targets and Approaches to the Treatment of Epilepsy



Edited by
Matthew C. Walker

Review Article

Bone health in adults with epilepsy

Svalheim S, Røste LS, Nakken KO, Taubøll E. Bone health in adults with epilepsy.

Acta Neurol Scand: 2011; 124 (Suppl. 191): 89–95.

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Patients with epilepsy have a 2–6 times greater risk of bone fractures compared with the general population. There are several potential explanations. Some fractures are caused by seizure-related injuries, or they may be associated with the osteopenic effect of reduced physical activity in patients with epilepsy. Antiepileptic drugs (AEDs), especially those that affect the liver enzymes, e.g., phenytoin, carbamazepine, phenobarbital, as well as valproate, are also associated with increased fracture rate and low bone mineral density. Many patients with epilepsy and general practitioners seem unaware of this problem. Measurements of bone density should be taken regularly in patients at risk of developing osteoporosis. Non-pharmaceutical initiatives, such as partaking in regular physical activity and eating a well-balanced diet, should be recommended. The risk of developing osteoporosis should be taken into consideration in the selection of an AED for treating a newly diagnosed patient with epilepsy.

**S. Svalheim¹, L. S. Røste¹,
K. O. Nakken² and E. Taubøll^{1,3}**

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Key words: antiepileptic drugs; bone mineral density; calcium; fractures; osteoporosis; vitamin D

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PHABPHAL K, GEATER A, LEELAWATTANA R, SATHIRAPUNYA P, SATTAWATCHARAWANICH S, LIMAPICHAT K. Prevalence and risk factors of low bone mineral density and 25-hydroxyvitamin D status in young healthy epileptic adult patients in a tropical Asian country taking antiepileptic drugs. *Bone* 2009;**45**:232–7.

Review Article

In a study from Thailand (17), BMD values were found to be reduced to osteopenic levels in 36% of 123 adult patients with epilepsy and to osteoporotic levels in 4.1%. Although 20% of the patients had vitamin D deficiency, this was unrelated to low BMD. Low body mass index, female gender, and longer duration of treatment were risk factors for bone loss.

well-balanced diet, should be recommended. The risk of developing osteoporosis should be taken into consideration in the selection of an AED for treating a newly diagnosed patient with epilepsy.

PHABPHAL K, GEATER A, LEELAWATTANA R, SATHIRAPUNYA P, SATTAWATCHARAWANICH S, LIMAPICHAT K. Prevalence and risk factors of low bone mineral density and 25-hydroxyvitamin D status in young healthy epileptic adult patients in a tropical Asian country taking antiepileptic drugs. *Bone* 2009;45:232-7.

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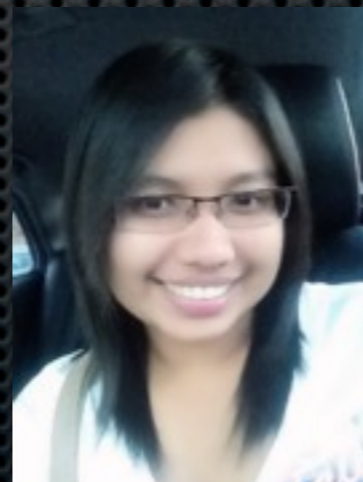


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