

## Combined Focal and Generalized Epilepsy Syndromes

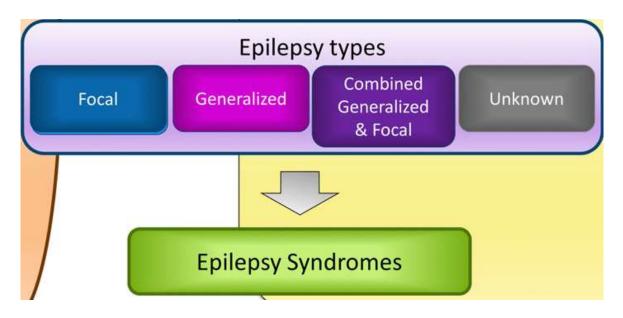
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# What is a combined focal and Generalized epilepsy syndromes?







### www.ilae.org

#### > Combined Generalized and Focal

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Seizure Classification

Generalized onset seizure

Focal Onset Seizure

Unknown Onset Seizure

**Epilepsy Classification** 

Generalized Epilepsy

Focal Epilepsy

Generalized and Focal Epilepsy

Unknown Epilepsy

**Epilepsy Syndromes** 

Neonatal/Infantile

Childhood

#### COMBINED GENERALIZED AND FOCAL EPILEPSY

Patients may have both generalized and focal seizure types, with interictal and/or ictal EEG findings that accompany both seizure types. Patients with Dravet syndrome and Lennox Gastaut syndrome may have generalized and focal epilepsy.

The diagnosis is made on clinical grounds, as there are patients who have both generalized and focal seizures, supported by EEG findings. Ictal recordings are helpful but not essential. The interictal EEG may show both generalized spike-wave and focal epileptiform discharges, but epileptiform activity is not required for the diagnosis.

#### **ILAE 2017 Classification of Seizure Types Expanded Version**<sup>1</sup>

#### **Focal Onset**

Aware

**Impaired Awareness** 

#### **Motor Onset**

automatisms atonic<sup>2</sup> clonic epileptic spasms<sup>2</sup> **hyperkinetic** myoclonic tonic

#### **Non-Motor Onset**

autonomic behavior arrest cognitive emotional sensory

focal to bilateral tonic-clonic

#### **Generalized Onset**

#### Motor

tonic-clonic clonic tonic myoclonic myoclonic-tonic-clonic myoclonic-atonic atonic epileptic spasms<sup>2</sup> Non-Motor (absence)

typical atypical mvoclonic eyelid myoclonia

#### **Unknown Onset**

#### Motor

tonic-clonic epileptic spasms Non-Motor behavior arrest

Unclassified<sup>3</sup>

- Definitions, other seizure types and descriptors are listed in the accompanying paper and glossary of terms.
- <sup>2</sup> These could be focal or generalized, with or without alteration of awareness
- 3 Due to inadequate information or inability to place in other categories

From Fisher et al. Instruction manual for the ILAE 2017 operational classification of seizure types. Epilepsia doi: 10.111/epi.13671

## Combined Focal and Generalized Epilepsy Syndromes

Common examples in which both types of seizures occur are:

- Dravet syndromes
- Lennox Gastaut syndromes
- Febrile seizure plus, GEFS+
- Photosensitive OLE
- Myoclonic encephalopathy in non-progressive disorders

- EME
- EIEE (Ohtahara)
- West syndromes
- EE with CSWS

## Lennox-Gastaut syndrome: Clinical presentation

### **\*History:**

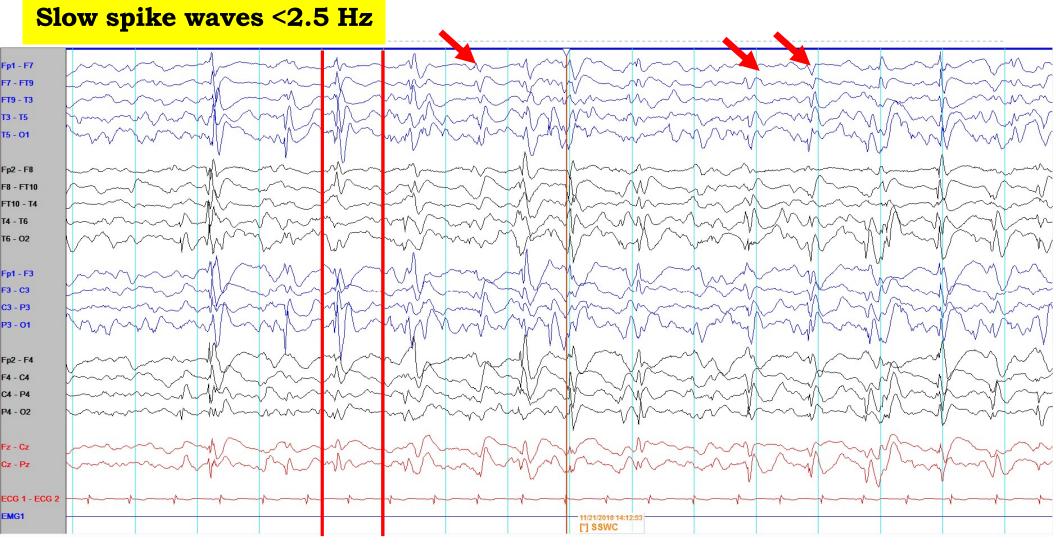
- Age onset from I-7 years of age (peak 3-5)
- Sex: both, 10-30% evolve from West syndrome or Otahara syndrome
- Prenatal and perinatal history: may be normal
- Development and cognitive-abnormal or normal and then subsequently stagnation or regression development after onset of seizures.
- Physical examination: may be normal or suggested structural brain abnormalities

## Lennox-Gastaut syndrome: Seizure types

- Tonic seizure: mainly, from sleep (in slow wave sleep or wakening), truncal, brief, can occur in series
- May have: GTCs, atypical absence(2/3 of patients), atonic (50% of patient), myoclonic seizure, myoclonic-atonic, focal seizure or epileptic spasms
- <u>Caution</u>: myoclonic sz predominate=>Dravet syndrome, myoclonic-atonic sz=>epilepsy with myoclonic-atonic seizure

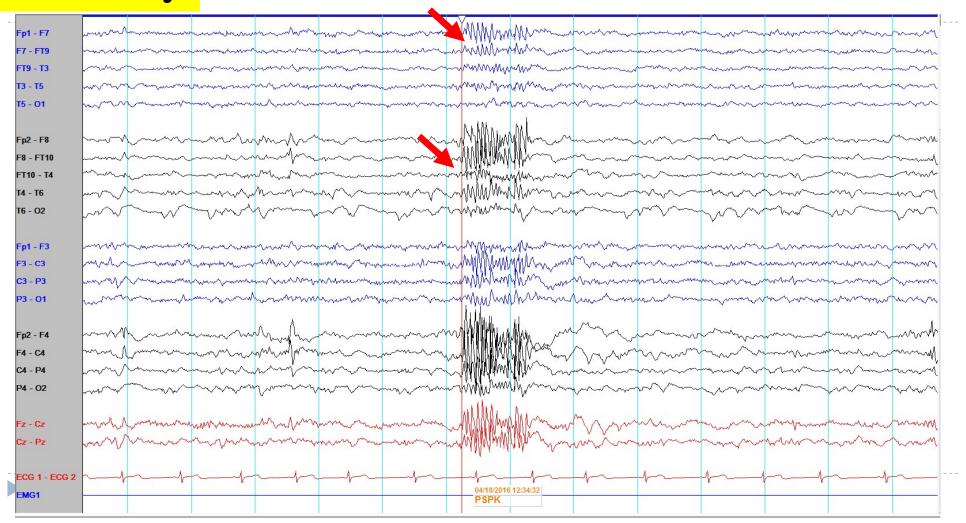
## Lennox-Gastaut syndrome: EEG finding





## Lennox-Gastaut syndrome: EEG finding

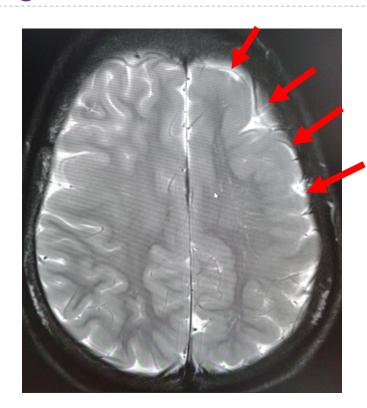
#### **Fast activity**



## Lennox-Gastaut syndrome:

## **Etiology:**

- Structural brain abnormalities (70% of cases)
- Genetic etiologies (de novo mutations): expected in many of currently unexplained cases



## **\*Prognosis:**

Poor prognosis, need multidisciplinary treatment

## Dravet syndromes

### Severe Myoclonic Epilepsy of Infancy (SMEI)

- \*First described in 1978 as SMEI by Dr. Charlotte DRAVET
- In 2001, Change name to "DRAVET syndrome"=>persist to adult and not only myoclonic seizure
- Incidence: 1:20000-30000
- Epileptic Encephalopathy: cognitive and behavioral impairments over those expected from the underlying etiology alone, and that suppression of epileptic activity might minimize this additional impairment.

## Dravet syndromes: Clinical presentation Severe Myoclonic Epilepsy of Infancy (SMEI)

### **\*History:**

- ♦ Age onset around 6 months of age (most:onset < 15 mo, minority: <2 yrs)</p>
- First seizure: 60% of cases associated with a **fever** (sensitivity of seizures to fever may persist throughout life), may be trigger by **immunization** (non-specific, first seizure)
- Sex: both, Antecedent, birth and neonatal history: normal
- Development: typically normal in the first year of life, with plateauing or regression in later years.
- Physical examination: Head size & N/S :initially normal, over time ataxia and pyramidal signs may develop.

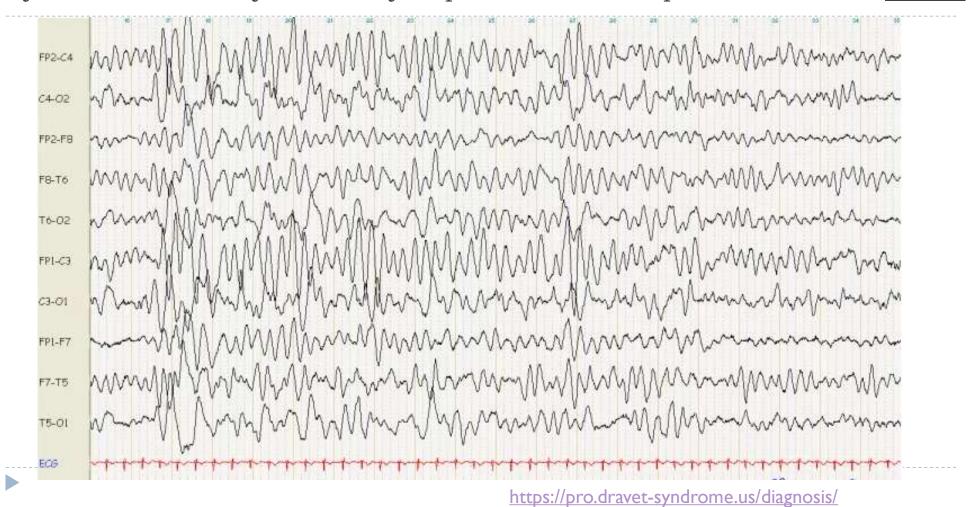
# Dravet syndromes: Seizure types

- Hemiclonic seizures: common, different side of body in different seizures
- Focal and generalized seizure types : clonic-tonic-clonic sequence to tonic-clonic
- <u>May have</u>: Atypical absence, Myoclonic, Atonic, Non-tonicclonic status epilepticus
- Caution: Tonic seizures and Epileptic spasms are not expected,
   =>consider other epilepsy syndromes.

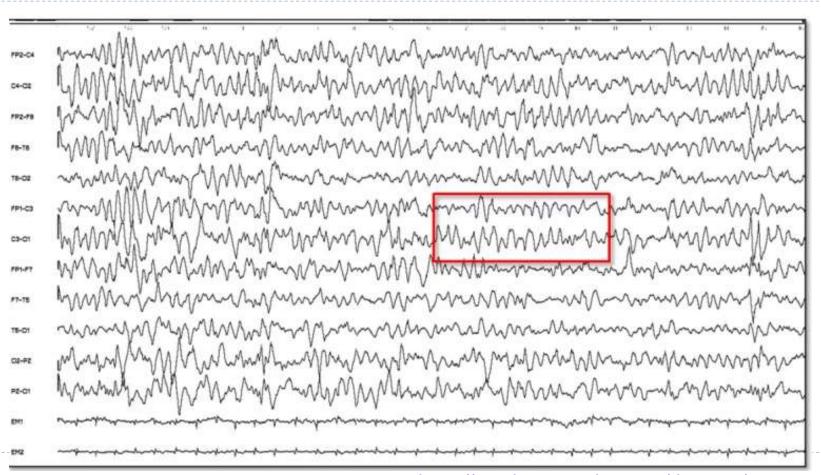
## Dravet syndromes: EEG findings

- ▶ Background: normal in first year of life=>diffuse slowing
- Interictal: Generalized spike and waves and multifocal discharges are seen by 2-5 years of age
- **Activation:** 
  - Photosensitivity; generalized spike and waves; atypical absence/myoclonic seizures (infancy, all ages)
  - Sleep deprivation and sleep: enhanced EEG abnormalities
- ▶ Ictal EEG: varies according to seizure types
- <u>Caution</u>: diffuse electrodecremental patterns/paroxysmal fast activity: not seen

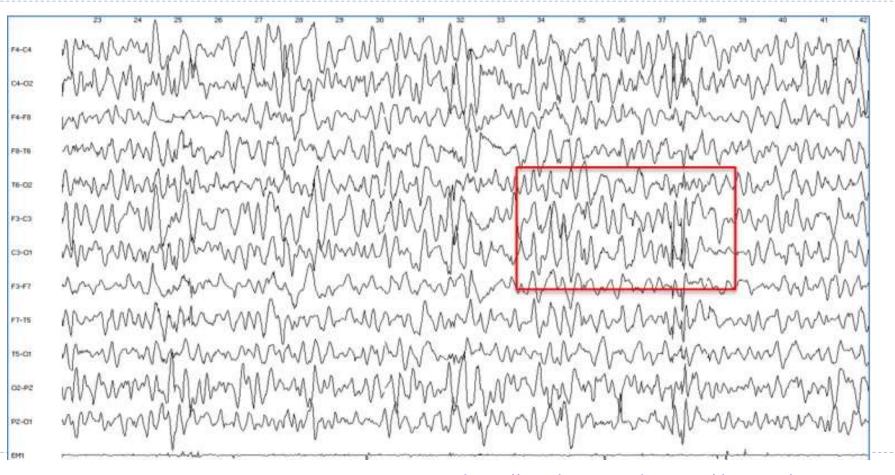
**Dravet syndromes: Onset 9 m** rhythmic theta activity 4-5Hz may be present on centro-parietal areas and **vertex** 



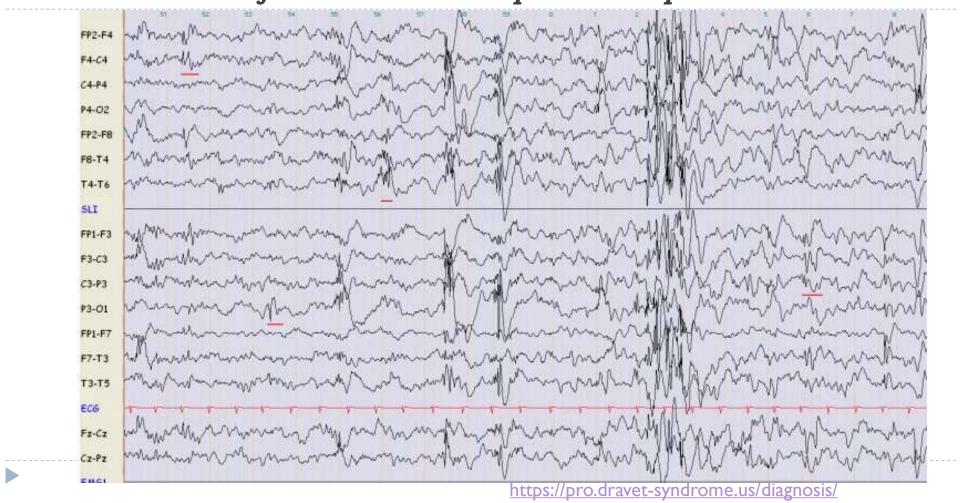
## Dravet syndromes: Worsening 3 yrs Background slowing, with 4Hz theta rhythms mostly on central areas.



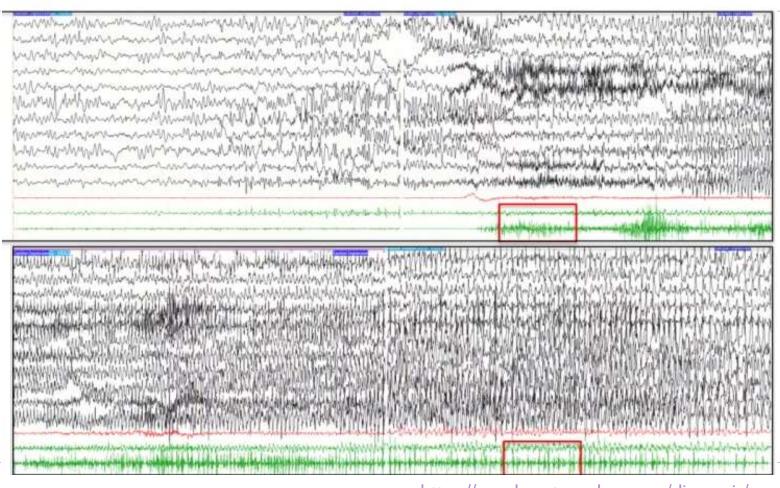
## Dravet syndromes: Worsening 4 yrs Slowing of background activity and rare bilateral central spikes.



Dravet syndromes: Worsening 5 yrs
Burst of generalised spike-waves associated with independent multifocal spikes
over the frontal-central and parieto-occipital areas.



## Dravet syndromes: Ictal Bilateral tonic-clonic seizure



https://pro.dravet-syndrome.us/diagnosis/

## Dravet syndromes:

- Imaging: usually normal at onset, 10% abnormalities (later); generalized atrophy or hippocampal sclerosis
- ▶ Genetics : 75% SCNIA (95% de novo, 5% inherited)
  - minority of females: mutation of PCDH 19 gene
  - 30-50% FH of febrile seizures
  - some of them: GEFS+

## Differential diagnosis

Clinical Feature	Dravet syndrome	Febrile seizures	Focal epilepsy	Doose syndrome (MAE)	Lennox-Gastau syndrome
Onset <1 year	+	+/-	+/-		_
Fever-sensitive seizures	+	+	+/-	+/-	-
Hemiconvulsion	+	_	+		
Generalised convulsion	+	+/-	_	+	+/-
Partial seizures	+	+/_	+		+/-
Myoclonic seizures	+/-	_	_	+	+/-
Tonic seizures	_	+/-	2-2	-	+
Atypical absences	+/-	_	-	+	+
Generalised epileptiform discharges	+/-	_	_	+	+
Multifocal epileptiform discharges	+/-	-	-	-	_
Focal epileptiform discharges	_	+	+		_
Photosensitivity	+	_	0.00		
Abnormal cognitive development	+	_	+/-	+	+
Abnormal brain MRI	-	_	+	+/-	+/-
SCN1A mutation	+/_	+/_	-		

https://pro.dravet-syndrome.us/diagnosis/

Dravet syndrome	Lennox-Gastaut syndrome		
Onset < 1 year	Onset > 1 year (between 2 and 8)		
Sensitivity to fever	No sensitivity to fever		
GTCS. No tonic seizures	Tonic seizures +++		
Atypical absences, myoclonic, focal seizures	Atypical absences, focal seizures, myoclonic seizures (rare)		
EEG: generalised/multifocal spikes	EEG: diffuse slow spike-waves, rapid diffuse rhythms(sleep)		
For 75%: SCN1A mutation	No SCN1A mutation		

## Treatment: NICE 2017

Epilepsy syndrome	First-line AEDs	Adjunctive AEDs	Other AEDs that may be considered on referral to tertiary care	Do not offer AEDs (may worsen seizures)
Dravet syndrome	Discuss with, or refer to, a tertiary paediatric epilepsy specialist Sodium valproate <sup>b</sup> Topiramate <sup>a</sup>	Clobazam <sup>a</sup> Stiripentol		Carbamazepine Gabapentin Lamotrigine Oxcarbazepine Phenytoin Pregabalin Tiagabine Vigabatrin
Lennox-Gastaut syndrome	Discuss with, or refer to, a tertiary paediatric epilepsy specialist Sodium valproate <sup>b</sup>	Lamotrigine	Felbamate <sup>a</sup> Rufinamide Topiramate	Carbamazepine Gabapentin Oxcarbazepine Pregabalin Tiagabine Vigabatrin

## **SUMMARY**

- The new group "Combined Generalized and Focal Epilepsies": both generalized and focal seizures and EEG support diagnosis
- Common example:

### Dravet syndrome and Lennox-Gastaut syndrome

- Considered an 'epileptic encephalopathy'
- Difficult or intractable to treatment, need multidisciplinary treatment