CHILDREN'S HOSPITAL LOS ANGELES COMPREHENSIVE EPILEPSY PROGRAM

Virendra R Desai

Director of Surgical Epilepsy and Functional



CHLA COMPREHENSIVE EPILEPSY PROGRAM













Neurosurgery



Neuroradiology



Neuropsychology











10.5 million

472,000

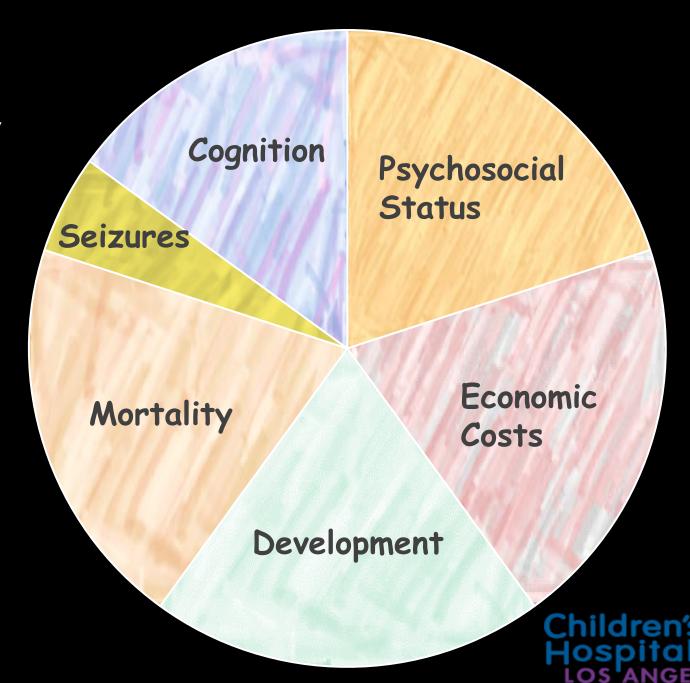
60,000

• ~1/3 medically refractory (Kwon and Brodie article: 47% seizure free after first AED; if one AED doesn't work, only 11% seizure free after second AED and 3% after third — due to inefficacy and not intolerance/side effects)





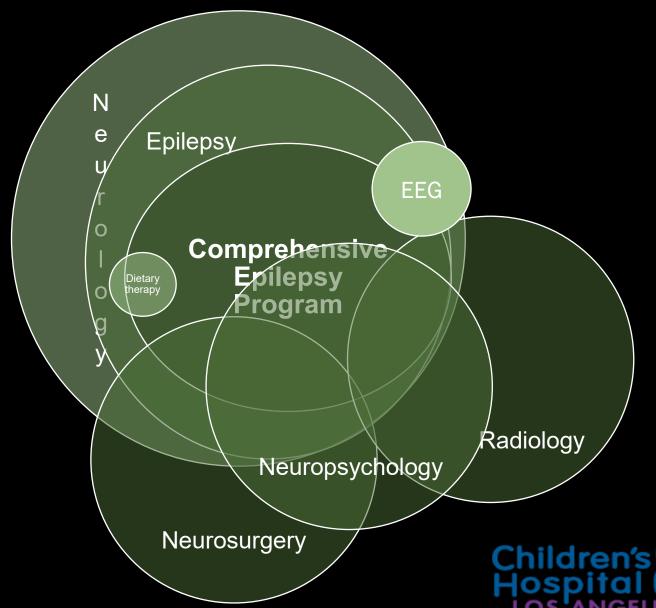
IMPACT OF EPILEPSY





"WHAT CAN WE DO FOR DRUG-RESISTANT EPILEPSY"

 Early referral provides best chance of preventing irreversible psychological and social problems, a lifetime of disability and death





EPIDEMIOLOGY





SURGICAL EVALUATION

1 and

H & P and
Semiology
vEEG
Structural Imaging
Functional Imaging
Neuropsychological
evaluation

2

iEEG

3

Bedside Mapping

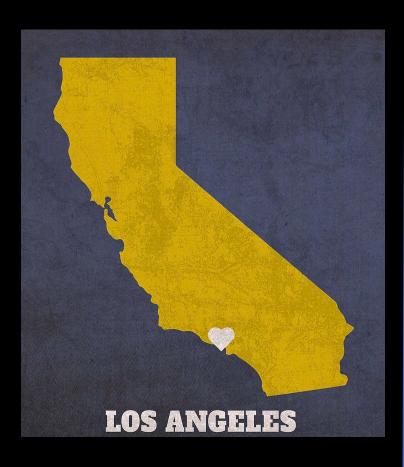


Surgery





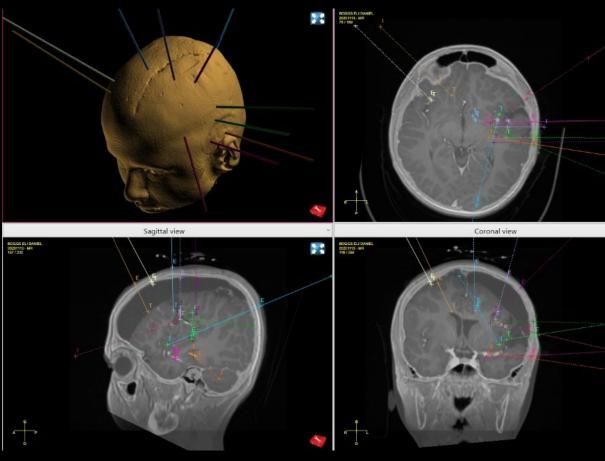
Standard EEG



Invasive EEG



ROBOTIC SEEG

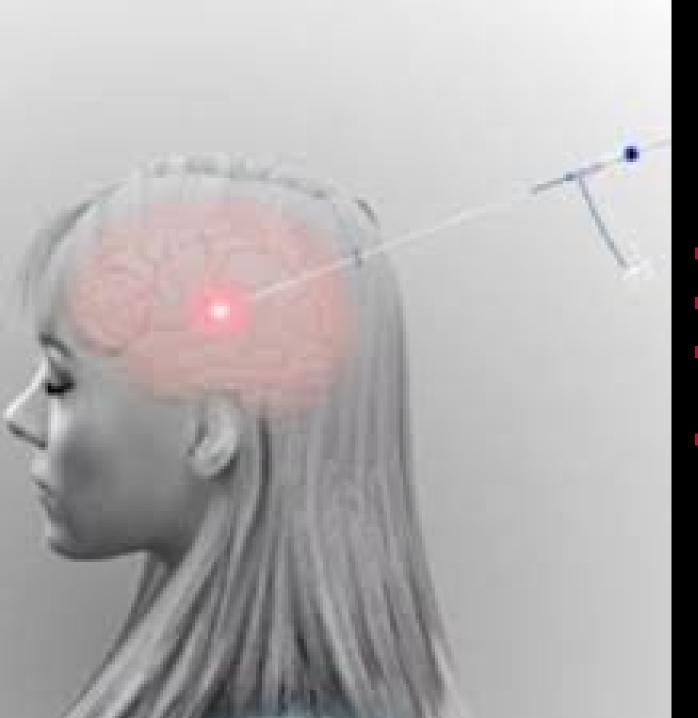












Stereotactic Laser Ablation

- Laser into tissue.
- Light energy is absorbed, creating heat.
- The heat destroys the target tissue while sparing critical structures.
- This is also known as Laser Interstitial Thermal Therapy (LITT).



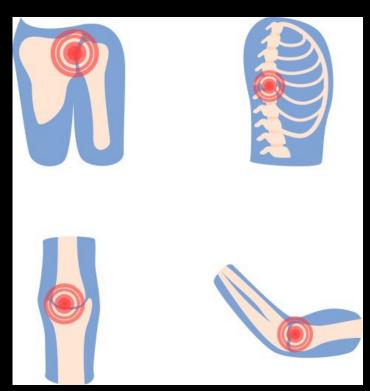
MOVEMENT DISORDERS

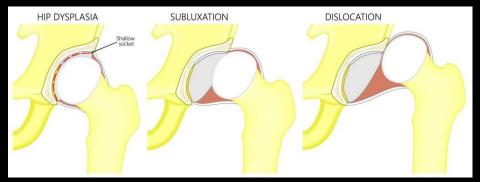
- Spasticity
- Dystonia
- Rigidity
- Choreoathetosis
- Tics



WHY TREAT HIGH TONE?









NEUROSURGICAL PROCEDURES

Spasticity	Dystonia
Intrathecal Baclofen Pump	Intrathecal Baclofen Pump
Selective Dorsal Rhizotomy	Deep Brain Stimulation

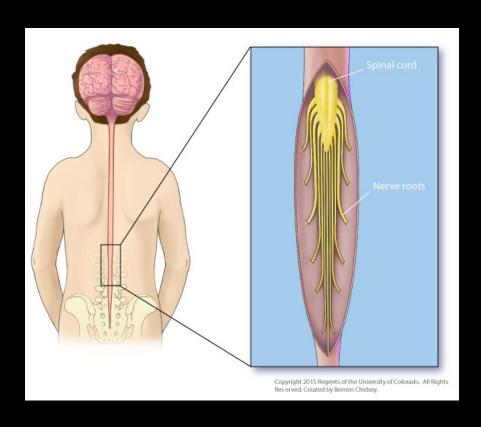




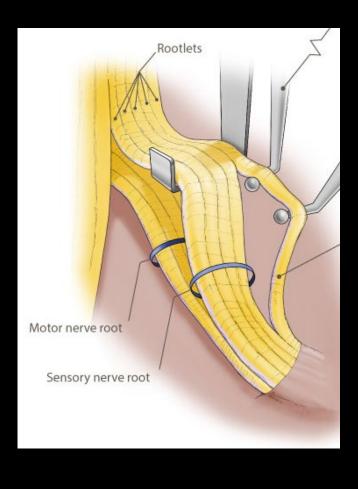




SELECTIVE DORSAL RHIZOTOMY

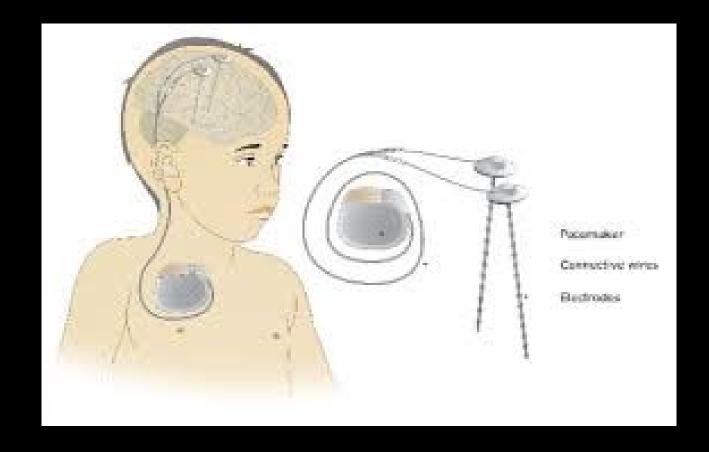








DBS







THANK YOU!

Vdesai@chla.usc.edu

• Cell: 281-414-8270

• Office: 323-361-2169