Ns. Arif Rohman Mansur, S.Kep., M.Kep
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EPILEPSY CHRONICLES

INSIGHTS INTO PEDIATRIC CARE

Editor : Ns. Ira Mulya Sari, M.Kep., Sp.Kep A.n

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INSIGHTS INTO PEDIATRIC CARE

"Epilepsy Chronicles: Insights into Pediatric Care" provides a comprehensive overview of pediatric epilepsy, covering its definition, prevalence, impact on child development, causes, symptoms, diagnosis, and treatment options. The book begins by explaining what epilepsy is and why it's significant in pediatric healthcare. It then explores how common epilepsy is in children, especially in those with autism spectrum disorder (ASD). The text examines the profound impact of epilepsy on child development, including its effects on cognitive and language development, attention deficits, and intelligence. We discuss the causes and risk factors of pediatric epilepsy, including genetic predispositions, traumatic brain injuries, and infectious diseases affecting the brain. Understanding these factors is crucial for early identification and management. The book also covers the symptoms of epilepsy in children, ranging from seizures to loss of consciousness and convulsions, and differentiates between the various types of epilepsy, including generalized and focal seizures. The book explains the diagnostic tools and testing methods used to assess pediatric epilepsy, including medical history, clinical examinations, advanced neuroimaging, and genetic testing. Various treatment options for managing pediatric epilepsy are explored, including medications, a ketogenic diet, and surgical interventions. Furthermore, this book emphasizes the significance of parents, caregivers, educators, and healthcare professionals collaborating to support children with epilepsy. This book serves as a valuable resource for anyone interested in understanding and addressing the complexities of pediatric epilepsy, aiming to contribute to the holistic care and well-being of affected children.

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PREFACE

Alhamdulillaahil-ladzii bini'matihi tatimmush-saalihaat. Praise be to Allah, Who has made all good deeds perfect. The book is titled: Epilepsy Chronicles: Insights into Pediatric Care.

This book is a comprehensive exploration of pediatric epilepsy, focusing on its definition, prevalence, impact on child development, causes, symptoms, diagnosis, and treatment options. The book begins by defining epilepsy in children and its significance in pediatric healthcare. Chapter two discusses the prevalence of epilepsy in children, including its prevalence in children with Autism Spectrum Disorder (ASD). Chapter three explores the profound impact of epilepsy on child development, including cognitive and language development, attention deficits, and intelligence.

Chapter four delves into the causes and risk factors associated with epilepsy, including genetic predispositions, traumatic brain injuries, and infectious diseases affecting the brain. Understanding these underlying factors is crucial for early identification, intervention, and management of pediatric epilepsy. Chapter five examines the symptoms of epilepsy in children, ranging from seizures to loss of consciousness and convulsions. Chapter six categorizes and elucidates the different types of epilepsy, including generalized and focal seizures. Chapter seven delves into diagnostic tools and testing methods used in the assessment of epilepsy in children, including medical history, clinical examinations, advanced neuroimaging, and genetic testing.

Chapter eight explores the various treatment options available for managing epilepsy in children, including medications, ketogenic diet, and surgical interventions. It also addresses educational considerations and the importance of collaborative involvement of parents, caregivers, and educators in supporting children with epilepsy. The book aims to serve as a valuable resource for healthcare professionals, educators, caregivers, and anyone interested in understanding and addressing the complexities of pediatric epilepsy. By synthesizing current research,

clinical insights, and practical strategies, it aims to contribute to the holistic care and well-being of children living with epilepsy.

Padang, 09 February 2024

Arif Rohman Mansur

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EPILEPSY CHRONICLES: INSIGHTS INTO PEDIATRIC CARE

UNIT 1 INTRODUCTION

A. Definition and Brief Explanation Of Epilepsy In Children

Figure 1 Definition of Eilepsy

Epilepsy is a complex neurological disorder characterized by recurrent seizures resulting from abnormal electrical activity in the brain (Badawy et al., 2015). It is a chronic condition that commonly affects children and can significantly impact their daily lives and development (Lee et al., 2019). The seizures associated with epilepsy can vary in type and severity, ranging from brief lapses in awareness to convulsions or muscle spasms

UNIT 2 | PREVALENCE OF EPILEPSY IN CHILDREN

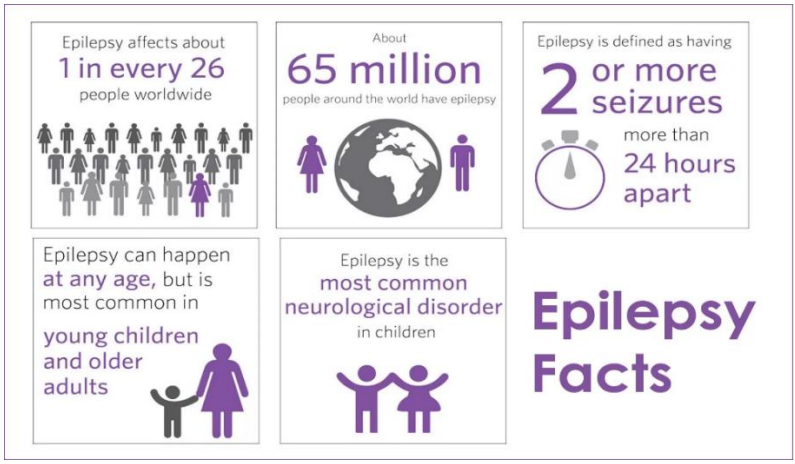

Figure* 2 *The Common of Epilepsy

Source: https://neurologist-ahmedabad.com/2018/01/22/things-you-dont-know-about-epilepsy/

A. Global Prevalence Variation

The prevalence of epilepsy is also higher in children with cerebral palsy, with estimates ranging from 15% to 60% worldwide (Szpindel et al., 2021). Furthermore, the prevalence of epilepsy in children with special needs is 30 times higher than in children without special needs (Tidman et al., 2003). The prevalence of epilepsy in middle and secondary school children has been reported to be 3.20 per 1,000 (Pachange et al., 2021). In high-income countries such as the United States, the median

UNIT 3

THE IMPACT OF EPILEPSY ON CHILD DEVELOPMENT

A. Cognitive and Language Development

The impact of epilepsy on child development is a complex issue that involves various aspects of cognitive and language development, attention, and memory. Research has shown that children with epilepsy may experience delays in cognitive and language development, as well as difficulties with attention and memory (Caplan et al., 2009; Koning et al., 2009; Selassie et al., 2008; Sherman et al., 2007; Moschetta & Valente, 2012; Reilly et al., 2019; Kang et al., 2015). Studies have indicated that the duration of epilepsy is associated with linguistic measures, implying that ongoing illness impacts all aspects of language development in young children (Caplan et al., 2009).

UNIT 4 | CAUSES AND RISK FACTORS OF EPILEPSY IN CHILDREN

A. Genetic factors and family history

Genetic factors and family history play a significant role in the development of epilepsy in children. Research has shown that certain genetic mutations and abnormalities, such as mutations in GRIN2A, SCN2A, SCN8A, GABRG2, NIPA2, CHD4, and CNKSR2, can increase the likelihood of seizures (Lemke et al., 2013; Helbig & Tayoun, 2016; Shen et al., 2016; Xie et al., 2014; Liu et al., 2021; Damiano et al., 2017). Additionally, familial clustering of epilepsy and behavioral disorders suggests a shared genetic basis (Hesdorffer et al., 2011). Studies have also revealed that deleterious missense mutations in ion channel and synaptic genes may contribute to the genetic risk of childhood epilepsy (Yao et al., 2021). Furthermore, mutations in genes encoding voltage-gated sodium channel subunits have been identified as dominant epilepsy genes (Dutton & Escayg, 2008). The response rates to perampanel in children with specific genetic variants associated with various syndromes, such as Dravet syndrome[1], were found to be high (Qu et al., 2022).

[1] Dravet syndrome, also known as severe myoclonic epilepsy of infancy (SMEI), is a rare and severe form of epilepsy that begins in infancy. It is characterized by prolonged seizures, often triggered by fever, that are difficult to control with standard antiepileptic medications. Dravet syndrome is typically associated with developmental delays, cognitive impairment, and other neurological and behavioral problems

UNIT 5 | SYMPTOMS OF EPILEPSY IN CHILDREN

A. Seizures

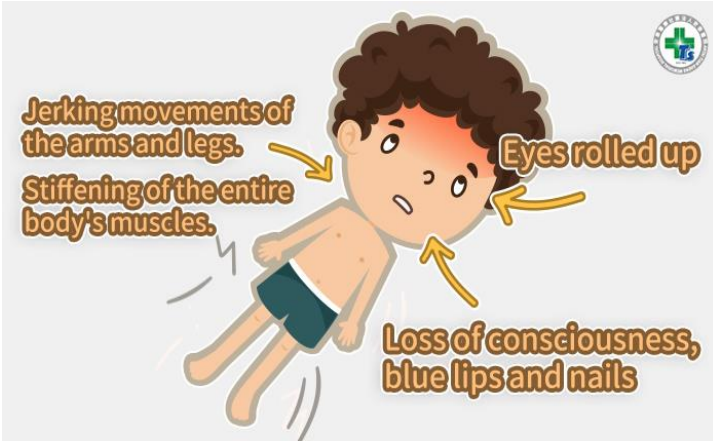

Figure 5 Seizure in Children

Source: https://www.tsmh.org.tw/sites/nursing_department/en/ped_02.html

Seizures are commonly associated with epilepsy, as they are considered the primary symptom of the condition (Lopes et al., 2019). However, it is important to note that not all seizures are indicative of epilepsy, as there are various types of seizures that can be caused by different factors such as febrile seizures or drug-induced seizures (Shinde & Warudkar, 2019). Additionally, the classification of seizures in epilepsy patients varies, with partial seizures being observed in a significant percentage of cases, followed by primary generalized seizures and unclassified

UNIT 6

TYPES OF EPILEPSY

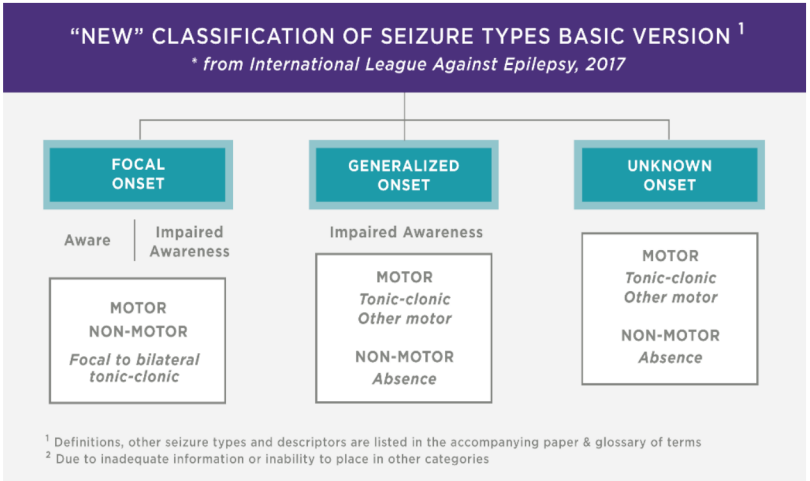

Figure 8 Seizure Types
Source: https://www.epilepsy.com/what-is-epilepsy/seizure-types

A. Generalized Epilepsy

The generalized seizures involve both hemispheres of the brain and can have a physical component or no physical component. However, there is competing evidence regarding the classification of generalized-onset seizures. argue that awareness is not a classifier for generalized-onset seizures, as the majority of generalized seizures present with impaired awareness or full loss of consciousness (Fisher et al., 2017). On the other hand, suggest that newborns have been shown to have seizures with

UNIT 7

DIAGNOSIS AND TESTING METHODS FOR EPILEPSY IN CHILDREN

A. Medical History

The diagnosis of epilepsy in children is a complex process that involves a comprehensive evaluation, including a detailed medical history, physical examination, and various tests to confirm the presence of seizures and determine the underlying cause (Jan & Girvin, 2008). Gathering information about the child's symptoms, seizure descriptions, developmental milestones, family history of seizures or neurological conditions, and any potential triggers is crucial in this process. However, the assessment of symptoms of depression and anxiety in children with epilepsy can be challenging due to the possible role of seizures and antiepileptic drugs (Reilly et al., 2011). Additionally, the identification of autism spectrum disorder (ASD) and social-cognitive deficits is an important aspect of comprehensive epilepsy care (Tuchman, 2015). Other diagnostic data, such as electroencephalography, video-monitoring of seizures, and magnetic resonance imaging, are important in any comprehensive epilepsy program, particularly for determining the type of seizure or seizure syndrome and localizing the seizure focus (Jan & Girvin, 2008). Furthermore, exploring novel methods for the accurate diagnosis of epilepsy is of great importance (Soliman et al., 2019).

B. Clinical Examination

The diagnosis of epilepsy in children involves a comprehensive clinical examination, including the assessment of neurological function, motor skills, reflexes, coordination, and

UNIT 8 | TREATMENT OPTIONS FOR EPILEPSY IN CHILDREN

A. Medications to Control Seizure

The management of epilepsy involves a variety of factors that influence the choice of antiseizure medication (ASM) for controlling seizures. These factors include the type of seizures, epilepsy syndrome, patient's age, potential side effects, and individual response to treatment (Wilmshurst et al., 2015). A systematic review and network meta-analysis by identified several common ASMs used for epilepsy, including carbamazepine, gabapentin, levetiracetam, phenytoin, and valproic acid (Lattanzi et al., 2019). However, it is important to note that the evidence supporting the standard of care for managing infants with epilepsy is lacking, and there is a need for more targeted randomized controlled trials (RCTs) across this population (Wilmshurst et al., 2015). Additionally, a systematic review and meta-analysis by concluded that the current RCT evidence was insufficient to support the use of any one ASM for seizures in the neonatal period (Hooper et al., 2021).

Furthermore, the International Ketogenic Diet Study Group updated their recommendations for the optimal clinical management of children receiving dietary therapies for epilepsy, suggesting similar outcomes in the use of dietary therapies for adults (Kossoff et al., 2018). highlighted the consideration of multiple new and established medications in the treatment of patients with refractory status epilepticus, emphasizing the necessity of a multidrug regimen in such cases (Allen & Vespa, 2019). Additionally, early diagnosis of specific epilepsy

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