

Teaching Video NeuroImages: Reading epilepsy

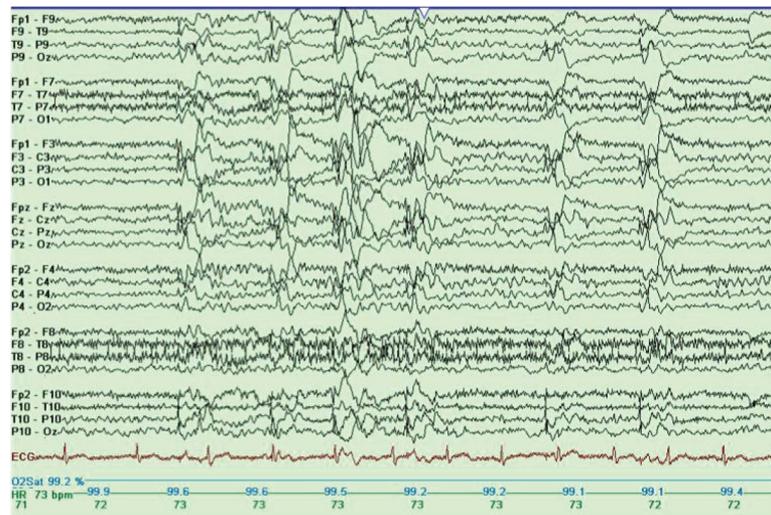
A seizure in a thousand words (or less)



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Figure Reading epilepsy captured on video EEG



Interictal EEG was normal during wakefulness and showed frequent midline central spikes during sleep. Reading precipitated frequent clonic jerks of the lower jaw, during which EEG showed generalized discharges maximal over the midline/left central head region. Jaw jerking appeared after 15 seconds of reading and was followed by a secondary generalized tonic-clonic seizure.

A 14-year-old right-handed boy developed spells of lip twitching only while reading. With prolonged reading, he occasionally experienced loss of awareness and limb jerking (figure and video on the *Neurology*[®] Web site at www.neurology.org). Reading epilepsy is a rare form of reflex seizure in which reading (silently or aloud) may trigger orofacial myoclonus, stammering, aphasia, or generalized convulsions. Onset is typically in early adulthood, with 2:1 male predominance. It occurs in isolation or autosomal dominant fashion.¹ Previous reports suggest efficacy of clonazepam, valproate, or levetiracetam.² Our patient did not tolerate levetiracetam but remains seizure-free on oxcarbazepine. Reading epilepsy should be recognized and promptly treated to avoid unnecessary academic struggles.

AUTHOR CONTRIBUTIONS

Dr. Gregory contributed to acquisition of data and drafting/revising the manuscript for content. Dr. Broomall contributed to analysis of data and drafting/revising the manuscript for content.

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DISCLOSURE

J. Gregory is a member of the *Neurology*[®] Resident & Fellow Section editorial team. E. Broomall reports no disclosures. Go to Neurology.org for full disclosures.

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2. Haykal MA, El-Feki A, Sonmez Turk HH, Abou-Khalil BW. New observations in primary and secondary reading epilepsy: excellent response to levetiracetam and early spontaneous remission. *Epilepsy Behav* 2012;23:466–470.

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