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Abstracts

Referral trends for temporal lobe epilepsy surgery between 2000 and 2014 in India

Background We conducted a retrospective study examining the trends in referral to a tertiary epilepsy surgery center in India over 2 decades.

Methods Data of patients who underwent long-term video electro encephalography monitoring for presurgical evaluation were retrospectively analyzed. Patients aged >16 years and diagnosed to have drug-resistant temporal lobe epilepsy (TLE) were included. They were divided into 3 groups comprising 5-year periods each during which they underwent presurgical evaluation, group 1: year 2000–2004; group 2: year 2005–2009; and group 3: year 2010–2014. Referral data with particular reference to duration of epilepsy before referral, age at onset of seizures, and number of antiepileptic drugs tried before referral were analyzed.

Results A total of 1,362 patients fulfilled the inclusion criteria. There were 385 referrals in group 1, 488 in group 2, and 489 in group 3. The mean duration of epilepsy before referral was 18.10 ± 9.44 years; there was no change in the duration of epilepsy before referral ($p = 0.638$). A significant increase in the age at onset of seizures and age at presurgical evaluation was noted over time.

Conclusion There is evidence for delayed referral of patients with refractory TLE to a surgical epilepsy center in this study. Renewed efforts to confront challenges beholding epilepsy surgery and steps to ensure timely referral are desirable.

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Carpal tunnel syndrome and associated symptoms as first manifestation of hATTR amyloidosis

Background Hereditary transthyretin amyloidosis (hATTR) is associated with significant morbidity and mortality. Early diagnosis and treatment are essential to improve patient's outcome. Carpal tunnel syndrome (CTS) is a common complication of hATTR amyloidosis. However, because CTS is also common in the general population, we wanted to assess whether CTS, when associated with systemic manifestations, could help direct physicians to screen for TTR gene mutation and early diagnosis.

Methods We reviewed the charts and interviewed the patients with hATTR seen between 2017 and 2018. We noted the details of CTS diagnosis, treatment, and other systemic features of the disease.

Results Seventeen of the 23 patients studied had CTS. CTS was the first manifestation of the disease in 10 of 17 patients. On average, CTS symptoms occurred 10.4 years before their diagnosis of hATTR amyloidosis. In 6 of 10 patients with CTS, the following systemic symptoms were present as the first manifestation: erectile dysfunction, dysautonomia, polyneuropathy, exercise intolerance, and gastrointestinal and ocular symptoms.

Conclusion CTS occurs in most patients with hATTR amyloidosis and frequently precedes the hATTR diagnosis. Most patients with CTS preceding hATTR diagnosis have systemic features. Recognizing systemic features at the time of CTS presentation may help in early diagnosis of hATTR amyloidosis.

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