



Serving Persons
Affected by Epilepsy

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hotline

PDL Committee Makes AED Ruling

Three of Five AEDs Receive Preferred Status

Based on the clinical recommendations from the Preferred Drug List (PDL) Advisory Committee and the cost analyses done on these anti-epileptic drug (AED) classes, Kansas Medicaid has designated the preferred/non-preferred status of five seizure medications.

MEDICAID AED DESIGNATION	
Preferred:	Gabapentin (Neurontin), Lyrica, Keppra
Non-preferred:	Gabitril, Zonegran



Any changes to the current PDL will be effective after the DUR Board reviews the prior authorization criteria for the non-preferred drugs and the rules and regulations process is completed.

These non-preferred drugs listed above will be reviewed at the May 10, 2006 Drug Utilization Review (DUR) Board meeting for prior authorization criteria.

In the Medicaid program, preferred drug lists (PDLs) indicate which drugs providers are permitted to prescribe without seeking prior authorization (PA). For drugs not included on the PDL, providers must obtain approval from the state Medicaid agency (or its contractors) before a particular drug can be dispensed.

If you have questions about these changes, please contact Mary Lesperance, R.Ph. Pharmacy Program Manager, DHPF, Kansas Medicaid, (785) 296-3981, mho@srskansas.org

Photosensitivity Study Examines UV Rays

 Blue Sunglasses Reported to Provide Seizure Protection

Italian scientists studying the protective potential of Z1 blue sunglasses report that the glasses were effective in blocking the abnormal brain waves in three-quarters of the photosensitive individuals who were tested. The lenses reduced but did not eliminate the abnormal response in another 17.9 percent, and provided no protection whatsoever in 6.2 percent of those tested.

The cooperative study was conducted with photosensitive epilepsy patients from 12 medical centers in Italy. The study group included 210 males and 400 females between the ages of 2 and 77. Individuals were tested by exposure to a flickering light adjusted to different frequencies while an EEG machine that recorded their brain waves.

In the report published in the journal *Epilepsia*, the researchers conclude that, "The results of our multicenter study give good evidence that the Z1 lens has great effectiveness in controlling photosensitivity. In our opinion, Z1 lens might become a valid resource in the daily activity of clinicians worldwide in the care of people with epilepsy." The Z1 blue lens is of an ultraviolet material with an 80 % luminance, a measure of the intensity or amount of light that passes through the lens. The sunglasses are available in many eyewear outlets.

EPILEPSY FOUNDATION

Living with Epilepsy... a presentation by

Keith Trevolt, ARNP

Advanced Registered Nurse Practitioner
Via Christi Comprehensive Epilepsy Center

Saturday, May 20, 2006

10:00 AM —Noon

2919 West Second Street, Wichita 943-2453

An informative presentation vital to all that have been affected by an epilepsy diagnosis. Meet other patients and families living with seizure disorders. Information on VNS also to be presented.

LUNCH will be served following the presentation.

■Please RSVP if you intend to stay for FREE lunch.



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Lunch sponsor

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943-2453

Teachers Still Unprepared for Kids with Seizures

Elementary and middle school teachers in the United States say they are less familiar with epilepsy than they are with six other chronic health conditions among their students. Although epilepsy is the most common neurological condition among children, fewer than half of teachers surveyed felt they had adequate training or sufficient knowledge to respond to seizures in the classroom.

The findings are from an Epilepsy Foundation-sponsored national survey of 512 teachers conducted recently by researchers in the University of Kentucky, Special Education and Rehabilitation Counseling Department.

Almost three-fourths of teachers (70%) rated their knowledge of epilepsy on the lower end of the scale. Of asthma, HIV/AIDS, diabetes, autism, mental retardation, epilepsy and ADHD, teachers were least familiar with epilepsy.

The study also found that teachers with the most positive scores in terms of attitudes and knowledge tended to be female, had more years of teaching experience, higher levels of education, and were currently teaching a student with epilepsy. EPILEPSY FOUNDATION

Teens with Seizures Suffer From Lack of Treatment

Teens with chronic illness are more likely to suffer from depression than teens in the general population. The association between teens with epilepsy and depression appears to be even stronger, according to researchers. Society's negative attitude toward each of these conditions imposes a double burden on affected teens they report. As a result, many will tend to minimize their depressive symptoms until they can't function anymore.

In the study reported in the March issue of the journal *Neurology*, up to 60% of all teens with epilepsy will experience depression or other mental illness. But only 33% of them will get any treatment. The lack of treatment puts these teens at a high risk of suicide as well. Depressive symptoms also tend to be minimized by parents who are reluctant to ask for referral to mental health professionals for help.

Epilepsy and Mood Disorders

More than 50% of Epilepsy Patients May Have Depression

It has been recognized for years that patients with epilepsy are more likely to develop depression, which may occur in more than 50% of patients. Depression is the most frequent psychiatric condition noted in people with epilepsy. Patients with complex partial seizures are particularly susceptible to depression.

Seizures appear to predispose patients to develop depression. The lack of predictability of seizures and the stigma associated with epilepsy may also contribute to feelings of depression. The risk of psychiatric hospitalization for patients with epilepsy and depression is higher than for nonepileptic patients with depression.

Risks for depression include neurobiological (e.g., head injury, central nervous system infection, stroke), psychosocial (e.g., inability to drive, effect of seizures on interpersonal relationships, stigma, work), and iatrogenic (e.g. adverse effects of AEDs and other medical treatment). Specific features of epilepsy that appear to be associated with an increased risk of depression include auras of psychiatric symptoms, late onset of seizures, and multiple seizure types. Partial seizures and seizures of left temporal lobe origin have also been reported as risk factors, but these observations require confirmation.

Depression is the most common psychiatric complication following epilepsy surgery, and temporal lobectomy may result in de novo depression and suicide attempts. A history of depression may also be a poor prognostic factor for success of temporal lobectomy.

AEDs may be associated with negative behavioral effects, particularly the barbiturates (phenobarbital and primidone). The exacerbation or de novo (new) appearance of depressive symptoms should prompt an investigation of any negative side effects from a newly added or increased AED. Carbamazepine, gabapentin, topiramate, lamotrigine and levetiracetam may have negative behavioral effects in children with developmental delay. AEDs, however, may also have positive effects on mood (e.g., lamotrigine).

Depression contributes to the risk of suicide in patients with epilepsy, particularly in patients with complex partial seizures originating in the temporal lobe. Suicide is more common in patients with refractory epilepsy and patients who are psychotic. Among the AEDs, barbiturates have the strongest association with suicide and should be avoided, when possible, in people with epilepsy at risk of depression.

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Adult Epilepsy Support Group

Meets Second Tuesday of Month at 6:30 PM
2919 W. 2nd Street, Wichita (943-2453)

May 9th: Epilepsy in the Workplace II
June 13th: Stress & Seizures

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E-mail: erc@arc-sedgwickcounty.org

Web: www.arc-sedgwickcounty.org/erc.html



Epilepsy Surgery Shows How Brain Works

Surgery Confirms Brain Area for Word Forms

Epilepsy surgery has been a major contributor to the current level of understanding of how the brain works. French neuroscientists who carried out experiments before and after epilepsy surgery in one patient have found evidence that a certain region—called the Visual Word Form Area (VWFA)—is devoted to our ability to read words and sentences without stopping at each letter. In 1892, the French neurologist Jules Déjerine suggested that the loss of this ability was due to a lesion that selectively disconnected visual input from a brain region that stores word images.

The researchers report in the April 20 issue of the journal *Neuron* the results of pre- and post-surgery reading, language, and object recognition tests on a 46 year-old male epilepsy patient. They found his reading capability before surgery to be normal, including the ability to recognize long words as quickly as short ones, but after the surgery the recognition time increased significantly in proportion to the word length. This indicated that he had been reduced to reading words letter by letter. The patient could still quickly identify objects, however, confirming the hypothesis that the VFWA has an exclusive role in word recognition.

Brain mapping is an invaluable aid to neurosurgeons in preserving the ability to perform certain brain functions. While surgery in this patient did result in some functional loss, the knowledge gained adds to the functional map of the brain and contributes to the potential success of surgical procedures in areas bordering the VWFA.

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erc invites individuals with epilepsy and their families to enjoy a free* Wichita Wranglers baseball game. We have a limited amount of tickets—first come, first served.

Please call Alisa at 943-1191 to reserve your seats.

*erc appreciates Jack Bankston of SportService for the donation of tickets.

6:30 PM
Thur April 27 vs. Midland Rock Hounds
Tues May 30 vs. Corpus Christi Hooks
Thur June 8 vs. Springfield Cards

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