

INTERNATIONAL LEAGUE AGAINST EPILEPSY

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Wednesday 13 October 2021

Dear Dr Kestel,

The International League Against Epilepsy (ILAE) would like to take this opportunity to thank the WHO secretariat for all the hard work, careful consideration, and attention to promoting inclusion during the consultations to develop the draft Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders (IGAP).

ILAE has reviewed the consolidated comments on the draft IGAP. We fully agree with the sentiment consistently expressed by all commentators that the first draft is clear, well-structured and, most importantly, provides a good balance between 'horizontal' approaches to system strengthening and 'vertical' approaches for high priority conditions such as epilepsy.

ILAE hopes that this balance will be preserved as the second draft (draft for the Executive Board) of the IGAP is developed.

ILAE would be very concerned if Strategy Objective 5 were to be renamed or amended resulting in a loss of focus on epilepsy as a public health imperative and as a cost-effective entry point for strengthening neurological services particularly in low resource settings.

Such a loss would significantly undermine the spirit and clear intent of the WHA resolution 73.10 that was approved by all Member States and would negatively impact the effective balance achieved in the first draft.

It would also result in a significant missed global opportunity to address the decades long unacceptably high treatment and inclusion gaps for millions of people with epilepsy.

Given the excellent way in which the WHO secretariat has to date been able to skillfully craft an inspiring framework for action, ILAE trusts that the draft that will be presented to the Executive Board will maintain the current balance, content, and focus of Strategic Objective 5 and that, in line with the title and intent of Resolution WHA 73.10, the phrase 'epilepsy and other neurological disorders' will be used throughout the document.

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ILAE hopes that the specific targets for reducing the service and opportunity gaps for people with epilepsy can be further strengthened, suggestions for which were included in the letters of 28 July (ILAE and IBE), 12 August (ILAE, WFN and INCA) and 15 August (ILAE) which are attached for your ease of reference.

Once again ILAE would like to thank the WHO secretariat for producing an excellent and well balanced first draft and look forward to reviewing the second draft when it becomes available.

Yours sincerely,

A handwritten signature in cursive script, appearing to read "J Helen Cross".

Prof J. Helen Cross OBE
President, International League Against Epilepsy