

The Neuropsychiatry Commission Activity Update

Kousuke Kanemoto, Neuropsychiatry Commission Chair

As you know, 20-30 percent of the patients with epilepsy suffer from some kind of psychiatric problem and the impact of this on quality of life is at least as serious as seizures themselves. However, psychiatric issues have not attracted a corresponding level of attention among epilepsy specialists. As John Hughlings Jackson once said, “we need to be botanist and gardener at the same time to take care of patients with such a complex disease as epilepsy.” Whilst the botanist side of epilepsy appeals so much to specialists, the gardener aspect of it tends to be unpopular. Psychiatric issues in epilepsy still need a lot of gardener-like coping skills, which awaits a systematic approach from the field of epilepsy.

Since the start of the new Commission on Neuropsychiatry, from 2013 in Montreal, we have planned a number of initiatives covering all areas of psychiatric impact in epilepsy: depression, psychosis, epilepsy surgery, childhood issues, discussion between neurologist and psychiatrist, and educational matters. We have established Task Forces specializing in each of these topics. All the members of the Task Forces are now striving hard to get visible achievements on the relevant issues.

In the first half of our Commission’s time, we are focusing on two tasks. I am going to address these issues first and then briefly summarize the other activities.

The first is about behavioral problems in adults with an intellectual disability and epilepsy. This subgroup of patients has a wide range of clinical backgrounds such as epileptic encephalopathy as a primary cause resulting in



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intellectual problems and underlying brain damage leading both to epilepsy and intellectual disability. The size of this subgroup is large but attention given so far has been not always sufficient. Mike Kerr and I are holding an international symposium titled “Epilepsy, behavior and intellectual disability: a time for change. An international ILAE conference” at Tokyo in 1 October 2014. The purpose of the meeting is to discuss key areas of need, and solutions to these needs, to reduce the burden of psychological and behavioral problems around the world especially in this subgroup. The planned speakers and Chairs include Christine Linehan (Ireland); Mike Kerr (UK); Kenji Sugai (Japan); Christian Brandt (Germany); Sara Wilson (Australia); Kousuke Kanemoto (Japan); Jun Kawasaki (Japan); Hirano Keiji (Japan); Yukari Tadokoro (Japan); Mbewe EK (Zambia); and Jo Wilmshurst (South Africa). Jo Wilmshurst is the current Chair of the Commission on Pediatrics of the ILAE. A close co-operation between both Commissions is in prospect. Our Child Task Force chair, David Dunn, will also promote this cooperation.

The second primary target is Psychogenic Nonepileptic Seizures (PNES). Markus Reuber now leads this Task Force. The precise goal of this Task Force is entitled “PNES around the world.” This Task Force will explore the present status of PNES around the world, especially different therapeutic approaches depending on different cultural backgrounds. At Stockholm in association with the 11th European Congress of Epilepsy, an international meeting on this issue is planned. Markus Reuber (UK); Kousuke Kanemoto (Japan); Alejandro De Marinis (Chile); Curt LaFrance (USA); Ali Akbar Asadi-Pooya, (Iran); David Giginishvili (Georgia); Ravi Paul (Zambia); and Kette Valente (Brazil) are intended attendees and will discuss this. Based on these discussions, an international symposium will be held on this matter at Nagasaki, Japan on 29 October 2015.

During the term of the last Commission, the Task Forces on Education and Depression made remarkable achievements. Marco Mula continues his leadership of the Educa-

tion Task Force, promoting VIREPA e-learning and plans to publish a textbook on neuropsychiatric issues in epilepsy. The Task Force on Depression under the leadership of Sung Pa Park, with the help of Andres Kanner, is promoting further dissemination of the Neurological Depression Disorders Inventory for epilepsy (NDDI-e) in nations where it has not yet been done. Because of the remarkable time-saving nature of NDDI as a screening tool for depression, dissemination of this is expected to heighten awareness of depressive states in patients with epilepsy around the world. Aileen McGonigal and Dongmei An are now translating the scale into French and Chinese, respectively.

The Task force on the Psychiatric Aspects of Epilepsy Surgery, chaired by Gerardo Filo, is working on identifying minimum requirements for psychiatric evaluation before surgical intervention, which should help clinicians who work in facilities where psychiatrists’ involvement is not currently available. The Task force on Psychoses, Chaired by Robert Kuba, plans to investigate gaps in our knowledge about mild psychotic experience both in health professionals and patients. Initially, a pilot study will be performed in Japan and the Czech Republic.

There are many other experts, who have kindly decided to become part of the Task Force and have not been listed here. Many new initiatives concerning psychiatric issues in patients with epilepsy will come out during our remaining term. I sincerely ask you all to help us to heighten the awareness of this important, but still relatively neglected area, and to kindly pay attention to our activities as gardeners directly confronted with patients with the doubly difficult situation that is epilepsy and psychiatric difficulties.

Commission Members: Kousuke Kanemoto, Chair, Andres Kanner, Marco Mula, Mike Kerr, David Dunn, Gerardo Filho, Robert Kuba, Sung-Pa Park, Markus Reuber, José Francisco Tellez-Zenteno, and Tatsuya Tanaka, MC Liaison.