Chair
Amadou Gallo Diop (Senegal)

Members
Secretary General
Yacouba Njankouo Mapoure (Cameroon)
Treasurer
Angelina Kakooza (Uganda)
Education Officer
Jo Wilmshurst (South Africa)
Research Officer
Pierre Luabeya (DR Congo)
Communication Officer
Birinus Ezeala Adikaibe (Nigeria)

Subcommissions and Members of Task force on Access to care:
Chair: Sammy Ohene, (Ghana)

Aims
1. To set up the organization of the commission on African Affairs,
2. To strengthen the communication and ILAE global outreach campaign of the CAA,
3. To establish and strengthen the education activities of the CAA,
4. To improve the access to care for patients with epilepsy,
5. To establish and co-ordinate epilepsy-related research activities in the African continent.

Mission of the Commission
The ILAE Commission on African Affairs shall serve all health professions in Africa as the premier international resource for current and emerging knowledge on epilepsy prevention, diagnosis, treatment, and research.

Commission Activities
July 2013 through June 2014

1. CAA Board Activities
   1. Participation in Montreal International Epilepsy Congress, with CCA Board meeting on 22 June 2013
   2. Participation in 9th International Congress of Societe Francaise de Pathologie Exotique, Dakar, 13 November 2013, and updating on Epilepsy in Africa
   3. Participation to PAANS, Abidjan, 14 March 2014 and updating Epilepsy in Africa

2. Election of New Members:
The following have accepted election to the Commission on African Affairs for the 2014-2017 term:
   Chair: Amadou Gallo Diop (Senegal)
   Secretary-General: Yacouba Njankouo Mapoure (Cameroon)
   Treasurer: Angelina Kakooza (Uganda)
   Education officer: Pr Jo Wilmshurst (South Africa)
   Research Officer: Pr Pierre Luabeya, (DR Congo)
   Communication Officer: Birinus Ezeala Adikaibe (Nigeria)

3. The 2nd African Congress on Epilepsy (ACE) held in Cape Town from 20 to 24 May 2014:
   287 participants from worldwide attended the ACE. This participation rate was relatively inferior to the 1st Congress due to reduced number of paramedical participants. Concerning the venue of the 3rd ACE, Dakar (Sénégal) officially expressed its candidacy. Other African towns were also suggested: Accra (Ghana) and Addis-Ababa (Ethiopia). The final decision should be made by the ILAE Executive Committee.

4. Communication: The CAA newsletter is now published only electronically to reduce the cost. During the convention in Cape Town, the need to share information, between people involved in the domain of epilepsy was recognized. It was then recommended to communicate all information relative to training and bursaries to researchers and caregivers. Also, each chapter was encouraged to send or share their activity with the Communication officer for public diffusion.

5. Education: There is a need to organize training in the field of epilepsy in Africa but the main difficulty is not only the language barrier (English, French and Portuguese) but also the financial constraints. It was advised to introduce a new vision consisting of many associate partners (WFN, IBRO, SONA, PAANS, EAN,
AAN, PAUNS, specialized neuro-societies) when organizing a training session. In this plan, a training on epilepsy for residents in neurology was organized in the Republic Democratic of Congo in September 2014 (convener: 2 Pierre Luabeya).

6. Global Campaign against Epilepsy: Progress has been made in some countries. But this remains insufficient and there is a need to involve more countries that are not yet ILAE-IBE Chapters. An awareness raising at World Health Organization (WHO) is currently done with the update document on epilepsy in Africa. The aim is to sensitize each African health ministry through WHO for doing something for epilepsy regarding: diagnosis, treatment, social implication (stigmatization, discrimination). The update document contains data from each country relative to population, care personnel and facilities, and socio-cultural and economic situation. The document is in the correction and publishing process within WHO-AFRO.

7. New Chapters: After the Montreal IEC General Assembly CAA officially has 3 new chapter members: DR of Congo, Cote d’Ivoire and Rwanda. Suggested to the ILAE Executive Committee to facilitate the integration of other African countries to the ILAE. Eight new African States have sent their candidacy to become members: Angola, Burkina Faso, Ethiopia, Malawi, Mozambique, Sierra Leone, Sudan and Zambia. Burkina Faso has succeeded in reorganizing its chapter. We hope to see it back in ILAE.

8. Financial Matters: Angelina Kakooza gave a brief report of the financial situation of the ILAE’s CAA: $97,000 US represent the global inflow. Presently, $48,000 US are available. But this is quite different from $113,000 US supposed to be available for CAA. Emilio suggested that for future Congress, CAA members should be chosen as speakers so that the Congress can pay their registration and accommodation fees.

9. News from Chapters:
   1. Benin: implementation of new education activities with new printed documents.
   2. Cameroon League against Epilepsy organized a workshop for general practitioners and nurses in rural areas on the diagnosis and treatment of epilepsy.
   3. Côte d’Ivoire: implementation of new training activities.
   4. Mali: implementation of new education activities with new printed documents and care with generic forms of VLP and PHE, especially in rural areas.
   5. Nigeria: Despite security instability in Nigeria, the Nigerian League Against Epilepsy achieved activities including sensitization of the population on epilepsy during World Epilepsy Day, research (many communications during the 2nd ACE and Congress at Montreal, Canada) and the establishment of the Nigerian Bureau of Epilepsy.
   6. Senegal: 4th promotion of the University Diploma of Epileptology of Dakar University with 11 new epileptologists from 8 African countries. Forty three epileptologist have been trained since 2010. Two TV shows and 4 radio broadcasts for public awareness have been realized in public and private media. The weekly consultations of epileptology are still organized every Wednesday at Pikine, a suburban area of the capital city of Dakar. Pharmaceutical company Sanofi has given to the SLAE two brand-new EEG machines.

Recommendations for Future Work
1. Continue to increase the number of African ILAE chapters
2. Regular publication of the regional IBE and ILAE/CAA newsletter online
3. Publish the updated GCAE document in French, English and Portuguese
4. Organize epilepsy training courses in French, English (i.e. during SONA Congress in Durban) and in Portuguese with more trainees and more cooperation with international and regional institutions
5. Elaborate guidelines for management of seizures for African neurologists, GPs and allied medical professionals.