

From the editors: Names count—The new operational definition of epilepsy and *Epilepsia*'s poll

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When and how a person is labeled as having “epilepsy” is not trivial, as it has major impact on patients and their lives. In 2005, the International League Against Epilepsy (ILAE) published its conceptual definition of epilepsy. In this issue of *Epilepsia*, the ILAE takes the next step in adopting an operational definition of epilepsy that is intended to be used clinically. This document is the product of bringing together experts for consensus and providing an opportunity for public comment from the international epilepsy community. In addition, this document has been endorsed by the ILAE through a new process involving soliciting public commentary.

Along with this Operational Definition report, we include complementary articles to explain the history, process, and still-unresolved issues. We start with an Introduction by ILAE’s president Emilio Perucca, who provides some background on the document and the process by which it was approved. This is followed by the report by Bob Fisher and colleagues. Commentaries from Chong Tin Tan, Steve Schachter, Elinor Ben-Menachem, and Allen Hauser provide critical assessments. Dr. Fisher closes by providing us

his thoughts and insight into the process of creating a document for common language and the challenges involved to attain consensus. Together, our epilepsy community can understand how the document was created, and the challenges and the compromises made.

As part of this report the Editors of *Epilepsia* are also initiating other ways to gather public opinion and comment related to the definition of epilepsy. As outlined in the document and commentaries, the Task Force did its best to substantiate the definitions with factual information, but this was sometimes impossible because of lack of data. In these situations the Task Force created definitions based on “best guess,” and often these definitions turned out to be the most contentious in the public comments and reviews. Although not official, the Editors are asking for our audiences’ opinion through an electronic poll. This is open to anyone as long as you are willing to identify yourself and the organization you represent (if applicable). We encourage you to go to <http://surveys.verticalresponse.com/a/show/1539433/ea840f4206/0>. The poll includes some of the following questions:

To complete this survey go to: <http://surveys.verticalresponse.com/a/show/1539433/ea840f4206/0>

The ILAE Task Force recommended that besides two unprovoked seizures more than 24 h apart, a person could be defined as having epilepsy after a single seizure if the probability of subsequent seizures was similar to the risk after two unprovoked seizures (more than 60–90%). In your view, would you label someone as having epilepsy if the risk of subsequent seizures after a first seizure was:

1. 30% or greater
2. 50% or greater
3. 60% or greater
4. 70% or greater
5. 90% or greater
6. Would never label someone with epilepsy after a single seizure

The ILAE Task Force accepted that a person with reflex seizures can be defined as having epilepsy even if the seizures were unprovoked. In your opinion:

1. Reflex seizures should qualify someone as having epilepsy
2. Reflex seizures are unprovoked and that person does not have epilepsy

The ILAE Task Force recommended the term resolved be used for those with epilepsy who have remained seizure-free for at least 10 years, with no seizure medicines for the last 5 years. Below, please select the definition you feel most comfortable for defining epilepsy as resolved:

1. Seizure-free for at least 5 years on or off seizure medicines
2. Seizure-free for at least 5 years off seizure medicines for 3 years
3. Seizure-free for at least 10 years on seizure medicines
4. Seizure-free for at least 10 years with no seizure medicines for at least 5 years (proposed definition)
5. Seizure-free for at least 10 years with no seizure medicines for at least 7 years
6. Epilepsy is never resolved and the risk of recurrence is high under any situation

The Poll will remain open until 15 June 2014. We will report the results thereafter.

DISCLAIMER

GWM was a member of the Task Force that created the document and the Task Force on creating endorsed documents. He recused himself through the peer-review process.