A Report from the Asian and Oceanic Affairs Commission

Byung-In Lee, Chair

It is a great honor to be elected as Chair of the Commission of Asian and Oceanic Affairs. It is one of the most culturally diverse Regions of the ILAE, and it also the Region with the largest population. This Region also varies greatly in the resources that are available in each of our member Chapters for treating epilepsy. The activities of the Commission range from encouraging breakthroughs in the laboratory and in clinical technology to advocating for access to basic epilepsy care. It has been a great satisfaction to all of us in this Region to see our efforts recognized through the many Ambassador for Epilepsy awardees that have come from Asia and Oceania in recent years and the Michael Prize for promising research that was given this year to Ding Ding of China. This recognition encourages us to continue our efforts, and I am proud and honored to be involved as Chair of the Commission. We have many goals on our agenda for the coming term, and I would like to outline them briefly.

One of the great educational efforts in our Region has been the collaboration between the CAOA and the Asian Epilepsy Academy (ASEPA). In the coming term we will expand this collaboration and work with individual National Chapters to promote the quality of teaching courses and workshops that have worked well to improve local professional understanding about epilepsy. We will also work together to increase press coverage of the Conferences, TV-interviews and public awareness programs so that general knowledge about epilepsy improves.

To improve our involvement in medical care and research we are expanding interactions with other epilepsy-related organizations (e.g., Infantile Spasms Society (ISS), Asian Epilepsy Surgeon’s Congress (AESC), Asian and Oceanian Congress of Neurology (AOCN)). We want to promote joint conferences and provide an epilepsy-teaching program at each Congress. We also hope to provide another perspective to each of the organizations.

The Global Campaign Against Epilepsy has had a major impact on the delivery of epilepsy care in our Region. We wish to continue that success by implementing CAOA-Demonstration Projects for the reduction of treatment gap in such countries as Myanmar, Bangladesh and Laos, where little care is available.

It is important to improve communication among the individual Chapters through the development of Information Committees for each Chapter to allow networking with information officers of the Chapters.

To improve epilepsy care in the Region, it is essential to have knowledgeable experts in each country. To meet that goal we will work to expand the Epilepsy Fellowship Programs for the training of young epileptologists from resource-poor countries. The success of this program in the past and into the future depends on support from advanced individual Chapters of the Region (e.g., JES, ESA, KES, TES, etc.). We will also look to fund-raise from many sources, including governmental support in collaboration with ILAE, IBE and the WHO.

In developing talent for the future, we must provide more learning and research opportunities to our young, talented colleagues throughout our Region. To encourage their success we have the Young Investigator programs and awards at the Asian and Oceanian Epilepsy Congress and we are actively recruiting young brains to the ILAE-Topic Oriented Commissions. To improve interaction and collaboration throughout the Region we are developing exchange programs of Fellows among the many advanced epilepsy research institutes.

These are exciting and challenging times for epilepsy care and research in our Region. I am honored to serve as Chair of this very dynamic Region, and I look forward to working with my regional colleagues to move the epilepsy field forward.

A Report from the North American Commission

Sheryl Haut, Chair

It is an honor and a pleasure to have been elected Chair of the North American Commission (NAC). I have been actively involved in the NAC for many years, initially as Secretary (2006-10), and subsequently as Chair (2011-13). I am truly proud of the mission of the NAC, the goals we have already achieved and the new and exciting directions planned for the 2013-17 term.

The NAC is a unique regional Commission, in that we have only three member Chapters: The American Epilepsy Society, the Canadian League Against Epilepsy, and the newly formed Epilepsy Society of the Caribbean. As such, each Chapter plays a very prominent role in all Commission activities. During the term now ending, we were involved in a number of projects including improvements in epilepsy education and care across the Americas as well as regional and international epilepsy advocacy. The Commission played a role in research in such areas as: disparities in epilepsy care, neurocytascisis and epilepsy and neonatal seizures. We were involved in harmonizing international regulatory issues, reducing stigma in epilepsy; and organizing regional and international symposia.

My own career involves adult epilepsy clinical care, clinical research with focus on seizure clustering, precipitants and prediction, and neurology/epilepsy education. During my years as training director of the Einstein Clinical Neurophysiology fellowship and subsequently Adult Neurology program, I developed a strong interest in education, which led to my role as Chair of the NAC Task Force on Education. Our Task Force was instrumental in designing the Partnering Epilepsy Centers in the Americas (PECA) program, which is a joint NAC-AES program in collaboration with the Latin American Commission, designed to promote epilepsy education and treatment across the Americas. The PECA program has sponsored more than 25 visits between faculty from North American and Latin American or Caribbean centers. Other NAC Commission and Task Force members who contributed greatly to this program include Jose Cavazos, Jean Gotman, Jacqueline French, Sharon Whiting, Nizam Ahmed and Jaideep Kapoor.

The success of the PECA program has led to an expanding collaboration with the African Commission, and the NAC has recently sponsored four partnering visits to Africa, including visits by NAC Commission members William Theodore and Lionel Carmant. The NAC has similarly developed a significant role in the promotion of epilepsy treatment in Haiti, led by Dr Carmant; and has supported newly formed epilepsy surgery programs in Jamaica, Peru, and the Dominican Republic. We anticipate that the NAC will continue to support and promote these partnership programs and present this program as a model for other regional Commissions.

Another success during the prior term of the NAC has been the creation of the Epilepsy Society of the Caribbean. Its ratification as an ILAE Chapter is anticipated during the Montreal meeting. NAC Commission members and Task Force members, including Dave Clarke and, in particular, Amza Ali, worked tirelessly towards this important goal, also developing biennial regional Caribbean epilepsy meetings that have been attended by representatives of 20 islands.

The NAC has also played a prominent role in international epilepsy advocacy, participating as a member and supporter of Vision 20/20 and the Institute of Medicine Report, and the PAHO epilepsy initiative. Nathalie Jette and I are serving on the Epilepsy Screening Tool IOM Task Force. We have participated in PAHO meetings in the US and Ecuador, and I will be joining the upcoming 2013 PAHO meeting in Santiago Chile. Finally, we have addressed other critical issues relevant to the international epilepsy community. Dr Jette has been conducting a meta-analysis of studies in epilepsy, in collaboration with a large international group representing other Commissions, with results to be presented in a symposium in Montreal 2013. Dr French has led a regulatory harmonization effort, in collaboration with the European Commission, the FDA and the EMA.

As we prepare to begin the new term, I want to welcome our new members Drs Jose Cavazos, Dave Clarke, Peter Carlen and Vicente Irarqui-Madrazo. We look forward to strengthening our previous collaborations with other Commissions, as well as forming new relationships. This is an exciting time for all of us who devote our time and careers to help persons with epilepsy in our own countries and around the world. In our next term, I look forward to continuing to work with the dedicated members and staff of the ILAE towards expanding these important projects, as well as planning and launching new initiatives.