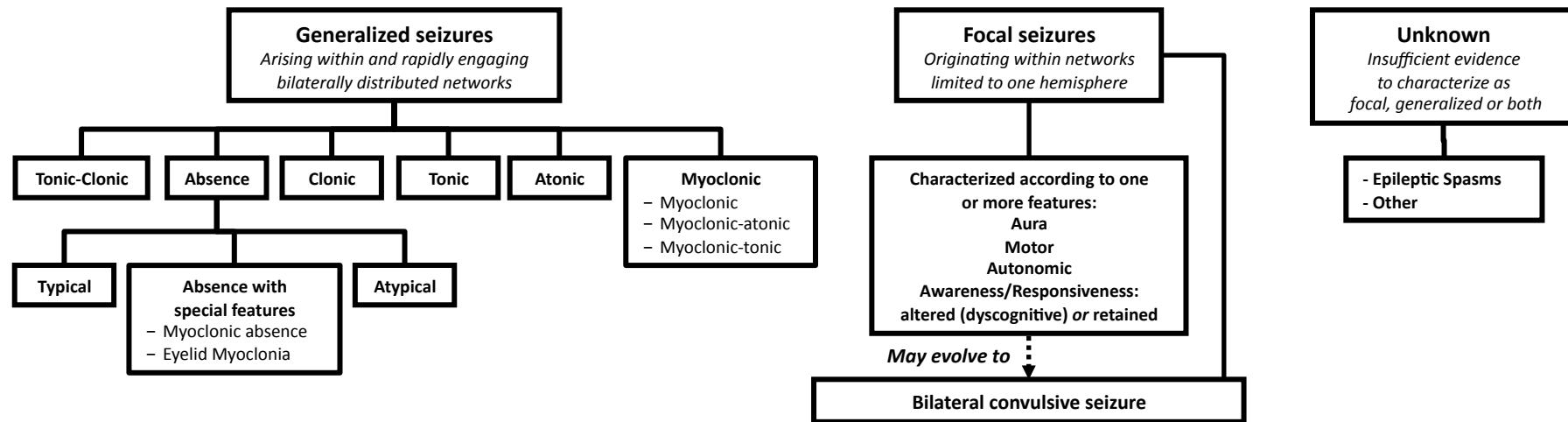


ILAE Proposal for Revised Terminology for Organization of Seizures and Epilepsies 2010

Classification of Seizures



Changes in terminology and concepts

New Term and Concept	Examples	Old Term and Concept
Etiology		
Genetic: genetic defect directly contributes to the epilepsy and seizures are the core symptom of the disorder	Channelopathies, Glut1 deficiency, etc.	Idiopathic: presumed genetic
Structural-metabolic: caused by a structural or metabolic disorder of the brain	Tuberous sclerosis, cortical malformations, etc.	Symptomatic: secondary to a known or presumed disorder of the brain
Unknown: the cause is unknown and might be genetic, structural or metabolic		Cryptogenic: presumed symptomatic
Terminology		
Terms no longer recommended		
Self-limited: tendency to resolve spontaneously with time	Benign	
Pharmacoresponsive: highly likely to be controlled with medication	Catastrophic	
Focal seizures: seizure semiology described according to specific subjective (auras), motor, autonomic, and dyscognitive features	Complex partial	
	Simple partial	
Evolving to a bilateral convulsive seizure: eg. tonic, clonic, tonic-clonic	Secondarily generalized	

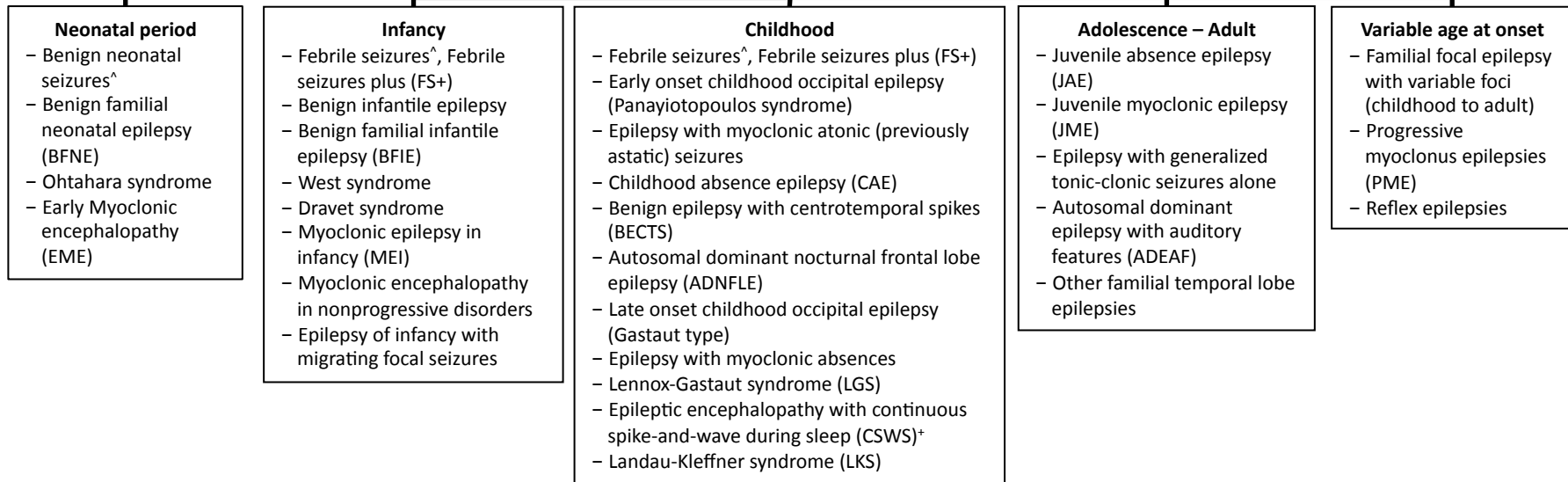
References: 1.Berg AT et al. Revised terminology and concepts for organization of seizures and epilepsies: report of the ILAE Commission on Classification and Terminology, 2005-2009. *Epilepsia* 2010;51:676-685. 2.Berg AT, Cross JH. *Lancet* 2010;9;459-61. 3.Blume WT et al. Glossary of descriptive terminology for ictal semiology: Report of the ILAE task force on classification and terminology. *Epilepsia* 2001;42;1212-1218.

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Electroclinical Syndromes and Other Epilepsies Grouped by Specificity of Diagnosis

Electroclinical syndromes

One example of how syndromes can be organized:
Arranged by typical age at onset*



Distinctive constellations/surgical syndromes

- Distinctive constellations/Surgical syndromes**
- Mesial temporal lobe epilepsy with hippocampal sclerosis (MTLE with HS)
 - Rasmussen syndrome
 - Gelastic seizures with hypothalamic hamartoma
 - Hemiconvulsion-hemiplegia-epilepsy

Nonsyndromic epilepsies**

- Epilepsies attributed to and organized by structural-metabolic causes**
- Malformations of cortical development (hemimegalencephaly, heterotopias, etc.)
 - Neurocutaneous syndromes (tuberous sclerosis complex, Sturge-Weber, etc.)
 - Tumor, infection, trauma, angioma, antenatal and perinatal insults, stroke, etc

Epilepsies of unknown cause

* The arrangement of electroclinical syndromes does not reflect etiology,
[^] Not traditionally diagnosed as epilepsy
⁺ Sometimes referred to as Electrical Status Epilepticus during Slow Sleep (ESES)
^{**} Forms of epilepsies not meeting criteria for specific syndromes or constellations

This Proposal is a work in progress....

We welcome your thoughts on this proposal. Please visit our Classification & Terminology Discussion Group at: <http://community.ilae-epilepsy.org/home/> to login and register your comments.