Global Outreach:
Spreading the Word on Epilepsy Care

2010 ANNUAL REPORT
International League Against Epilepsy’s **vision** is a world in which no person’s life is limited by epilepsy.

International League Against Epilepsy’s **mission** is to ensure that health professionals, patients and their care providers, governments, and the public worldwide have the educational and research resources that are essential in understanding, diagnosing and treating persons with epilepsy.
TABLE OF CONTENTS

GOVERNANCE
Executive Committee List 2
President 3
Treasurer 5
Secretary-General 6
Staff 7
First Vice President 8
Second Vice President 9
Third Vice President 10
Epilepsia 11
Information Officer 13
Global Campaign 15
International Director of Meetings 19

TASK FORCES
Past President Advisory Commission 22
Constitution Task Force 24

REGIONAL COMMISSIONS
Asian and Oceanian 26
Eastern Mediterranean 30
European 33
Latin American 35
North American 38

TOPIC-ORIENTED COMMISSIONS
Classification and Terminology 43
Diagnostic Methods 44
Education 46
Epidemiology 48
Genetics of Epilepsy 50
Neurobiology 51
Neuropsychobiology 52
Pediatrics 55
Therapeutic Strategies 56

CHAPTERS
Chapter Reports 59
Chapter Directory 78

OTHER ACTIVITIES
Morris-Coole Prize Announcement 86

CONSTITUTION 87

BYLAWS 90

Headquarters Office
342 North Main Street
West Hartford, Connecticut, USA
06117-2507
Tel +1 860.586.7547
Fax +1 860.586.7550
Website: www.ilae.org

Chapter Services Office
7 Priory Hall
Stillorgan
Co. Dublin
Ireland
Tel +353.1.278.4908
Fax +353.1.205.6156
EXECUTIVE COMMITTEE
2009-2013

PRESIDENT
Solomon L Moshé, MD
New York, USA

SECRETARY-GENERAL
Samuel Wiebe, MD
Calgary, AB, Canada

TREASURER
Emilio Perucca, MD, PhD
Pavia, Italy

PAST PRESIDENT
Prof Peter Wolf
Copenhagen, Denmark

FIRST VICE PRESIDENT
Tatsuya Tanaka, MD
Asahikawa, Japan

SECOND VICE PRESIDENT
Michel Baulac, MD
Paris, France

THIRD VICE PRESIDENT
Marco T Medina, MD
Tegucigalpa, Honduras

EPILEPSIA, CO-EDITORS-IN-CHIEF
Philip A. Schwartzkroin, PhD
Davis, CA, USA

Prof Simon D. Sharvon
London, England, UK

INFORMATION OFFICER
Edward H Bertram, III, MD
Charlottesville, VA, USA

IBE, PRESIDENT (EX-OFFICIO)
Mike Glynn
Dublin, Ireland

IBE, SECRETARY-GENERAL (EX-OFFICIO)
Prof Carlos Acevedo
Santiago de Chile, Chile

IBE, TREASURER (EX-OFFICIO)
Grace Tan
Singapore
In July 2009, the International League Against Epilepsy (ILAE) developed its four-year Strategic Plan in collaboration with past, current, and future leaders (http://www.ilae-epilepsy.org/visitors/about_ILAE/strategicplan.cfm). This is the first yearly progress report highlighting progress toward achieving the Plan’s goals.

**Goal 1: ILAE shall serve all health professions as the premier international resource for current and emerging knowledge on epilepsy prevention, diagnosis, treatment, and research.**

Our Commissions have been charged with fulfilling the Strategic Plan through their activities. Seven reports have been published or accepted for publication in Epilepsia in the past 12 months. These relate largely to activities initiated during the previous term under Peter Wolf and reflect the continuity of the work of our organization. As described in the Secretary-General’s report, Commissions and Task Forces continue to prepare core reports and guidelines to fulfill our mission. ILAE is also developing projects with other organizations such as the World Health Organization (WHO), the World Federation of Neurology, and the American Academy of Neurology.

Jean Gotman has been appointed Media Director and will work with Ed Bertram, Information Officer, to improve communication within the League. He is redesigning the website, ensuring that each Commission controls the look and content of its section and creating portals to our activities including long-distance education and global outreach. A new web-based program (Higher Logic) is in place to facilitate communication and interaction for ILAE projects.

The League solidified the organizational and financial stability of the long-distance education program by acquiring direct control and investing in the expansion of the Virtual Epilepsy Academy (VIREPA) and is promoting teaching courses under the coordination of regional academies. The Education Commission led by CT Tan is developing ways to make educational material generated from our Congresses freely available through the League’s website, working on publishing an online Textbook of Epilepsy and on the delivery of tele-education. Congresses are being reorganized to promote translational research venues that allow for better communication between basic scientists and clinicians.

The Neurobiology and the Education Commissions are developing proposals for further training of professionals including a combination of residential courses with hands-on experience and opportunities. The Regional Commissions and their respective academies have developed year round courses. Vital partners in basic research collaborations are the International Brain Research Organization and the Society for Neuroscience. An important aim is to identify and disseminate knowledge of possible funding sources for such programs, and increase public and government awareness to the needs of people with epilepsy.

**Goal 2: ILAE shall serve as an international information resource and leader for optimal, comprehensive epilepsy care.**

Together with the International Epilepsy Bureau (IBE), we have expanded the mission of the Global Campaign into the Global Outreach Task Force, chaired by Helen Cross and Shichuo Li with the expert assistance of Hanneke deBoer and the WHO. Work on a new vision statement is underway. Members of the epilepsy community in the US, Vision 2020 group (organized by the American Epilepsy Society) and the League proposed a vision statement that can be used by our constituents. The next step will be to test key phrases expressing the global message of our cause to see how they resonate with the public and with the people with epilepsy.

To better understand public health dimensions of the epilepsies, the League has joined the Vision 2020 group to work with the US Institute of Medicine to prepare a report on the challenges faced by people with epilepsy and the opportunities to improve care and research. Concurrently, a group was formed in Europe comprised of representatives of the ILAE Commission for European Affairs and the IBE European Regional Executive Committee with the aim of sensitizing policymakers to the need to improve epilepsy care across the European region.

The League held an organizational meeting in November 2010 to create the African Regional Commission. This Commission will reach out to countries where an ILAE Chapter has not yet been formed to stimulate the development of local constituencies.

There is a concerted effort to enlist public figures or prominent organizations with a wide audience to disseminate information and appeal to the public and philanthropists. In 2009, the League developed a collaborative effort with the Union of European Football Associations (UEFA), young athletes with epilepsy and former football stars playing together before the semifinals of the Under 21 European Championships in Sweden.

As epilepsy can be a manifestation of many diseases and epilepsy in turn can aggravate underlying disorders, we have formed alliances with key organizations such as Autism Speaks. We plan to...
assess the effects of comorbid conditions on outcomes as well as ‘holistic’ treatments for the full gamut of symptoms linked with epilepsy. In these endeavors, it is important to have ‘local champions’ that will move the project forward in terms of execution and financial support. In addition, we have begun discussing potential collaborations with global philanthropic organizations such as Project Hope, aiming at helping individual countries build a sustainable local infrastructure.

Goal 3: ILAE shall work to ensure its ongoing organizational and financial viability.

Individual Chapters are the essential core of the ILAE and we are striving to enhance function and representation, as described in the Secretary-General’s report. The advances in the enhancement of the management of our financial resources and transparency in disclosing financial data are described in the report by the Treasurer, Emilio Perucca.

Goal 4: The ILAE will address and implement thought-provoking and innovative concepts that advance the League’s vision and mission long term.

The Executive Committee is exploring ways to augment our interactions with all our partners including corporations. The aim is to take on a significant major initiative that would impact epilepsy research, education, and patient care for years to come. This ‘Big Idea’ will be developed in tandem with the external message we will identify and deliver to all concerned: people with epilepsy, caretakers, caregivers, governments, non-government organizations and the general public.

We again thank the many volunteers who contribute their time and energy toward accomplishing our strategic aims in our overall mission to improve the lives of people with epilepsy throughout the world.

Solomon L Moshé
President
The League’s Strategic Plan identified the need to “streamline the ILAE’s administrative structure and review its financial operational practice to ensure an efficient and effective management.” Several actions have been taken to fulfill this objective. Administrative support is provided by our Hartford staff under the leadership of Peter Berry, our Chief Staff Officer and Donna Cunard, our Financial Manager. This office also has the administrative responsibility for the activities of the regional educational academies. A new contract is being negotiated with Association Resources, the firm that provides our administrative services in Hartford. The International Epilepsy Congress and our Regional Congresses will continue to be organized by Chancel (IDM) in Dublin, under a new contract which was negotiated jointly by the League and the Bureau. Because organization of Congresses involves extensive interactions with our constituency, including individual Chapters, Chancel has also taken up responsibility for communication with Chapters. This function is the responsibility of Gus Egan, the Chapter Services Coordinator.

A primary task of the Treasurer is to act in conjunction with the Finance Committee in assembling the annual budget for discussion and approval by the Executive Committee. To improve transparency and to ensure that allocation of resources is in line with the priorities set by the Strategic Plan, a new two-tier procedure was introduced during the development of the 2010 budget. According to this procedure, budget requests submitted by our Commissions on a standardized template were reviewed by the Strategic Plan Task Force, in liaison with the Finance Committee and with the Chairs and Treasurers of individual Commissions. This innovation proved very valuable in optimizing the cost structure of specific projects and assisting the Executive Committee in the allocation of funds. The budgeting activities for 2011 have already been initiated and involve a similar reviewing procedure. To streamline the process, however, funding requests for the continuation of already approved projects will be evaluated directly by the Executive Committee.

To solidify the finances of the League, a new contract with favorable terms was signed with Wiley-Blackwell, who will continue to publish Epilepsia for the next 5 years. The League and the publisher are seeking novel strategies to improve the financial success of our Journal. The ILAE and Wiley-Blackwell are also working together to determine if there is an unmet, fundable need in the market for an educational product to non-epilepsy specialists and thus ideally impact care globally. This could lead to a broader dissemination of the Epilepsia brand.

The Finance Committee recognizes the need to protect our financial viability through a regular review of the investment policy and continuous monitoring of the performance of our investments. To this purpose, a Finance Advisory Subcommittee has been created that includes volunteer professionals from the international corporate and banking world, with top-level expertise on financial matters. The terms of reference of the newly formed subcommittee include review of the investment policy and the regular monitoring of our investment portfolio. The terms of reference of the Finance Committee have also been revised, improving efficiency in communicating with the Executive Committee on matters related to the League’s administrative and financial structure and operations.

Emilio Perucca
Treasurer
ILAE Chapters
The ILAE is an organization of Chapters. The local Chapter is the key player in implementing many of the initiatives. We have received applications from 22 countries and have provisionally accepted five Chapters for a total of 108 active Chapters. We need to facilitate and expedite the formation of new Chapters. To this end, the League’s secretariat is reviewing and modifying the existing rules for creating a new Chapter, and the requirements for creating Chapters consisting of more than one country in one territory. The first example of the latter will be a proposal to form a Caribbean Chapter. Regional Commissions have been asked to facilitate ways in which isolated clinicians can easily interact with the League in countries and territories where formation of an ILAE Chapter is currently unfeasible. Several of the Regional Commissions have developed Strategic Plans to interact more effectively with individual Chapters. The League is working with Wiley-Blackwell to make Epilepsia available online, free of charge to our constituencies in resource-poor countries belonging to the Hinari program.

Commissions and Task Forces
The Regional and Topic Specific Commissions of the ILAE together encompass over 40 working groups, involving more than 300 members from around the world who generously donate their time, expertise, and creative energy to achieve the goals established according to the League’s Strategic Plan. Workshops have been held with the Chairs of Regional and Topic Specific Commissions to help crystallize concrete plans. Throughout the process, interaction and collaboration has been emphasized. Specific areas of intersection and collaboration have been identified by the Commission leaders. The Commissions and Task Forces are setting up structures and processes to start implementing their individual action plans. There has been an effort to harmonize the goals and activities of the Global Campaign Against Epilepsy (GCAE) with the Regional Commission plans. Models of cost-effective interventions have been developed from projects in China and Brazil, and additional information is coming from Georgia and Bolivia. New projects have been approved for Ghana and Karnataka State in India, and we are considering a project in a developed country to investigate discrepancies in access to epilepsy care.

Published Reports
A core function of the ILAE is the production of reports and position papers which are used by the clinical and academic community worldwide. In addition to the reports published in Epilepsia this year, which are a culmination of work started during the previous Executive Committee term, Commissions and Task Forces are engaged in projects aimed at defining and refining concepts, identifying gaps in care and education, and delineating principles of epilepsy care. Many of these projects will result in published reports. In some of these initiatives the ILAE is collaborating with organizations such as the World Health Organization (WHO), the World Federation of Neurology, the American Academy of Neurology, and the Institute of Medicine. The WHO is in the process of developing a new version of the International Classification of Diseases (ICD-11). The Epidemiology Commission of the ILAE and Marco Tulio Medina are working with the WHO to develop a proposal for epilepsy-related codes for the ICD-11.

Regional Epilepsy Congresses
Four highly successful epilepsy Congresses took place this year in the Asian-Oceanian, Eastern Mediterranean, European, and Latin American Regions. The American Epilepsy Society (AES) hosted a joint AES and North American Regional Congress in December 2010 in San Antonio, Texas. In addition to the important academic function fulfilled by these Congresses, they also serve as the forum for interaction between Chapters and for developing and refining action plans within each region.

Constitutional Amendment
Because regional representation is important in the governance of the ILAE, a Task Force led by Tatsuya Tanaka is proposing a Constitutional amendment developed through extensive consultation with Regional Commissions. The amendment will ensure that every Region participates in the decision-making process and in the management of the League’s affairs. The document will be submitted for ratification to the General Assembly at the 29th International Epilepsy Congress in 2011 in Rome.

Conflict of Interest
Scrutiny of individuals and organizations regarding conflict of interest is increasing. It is important for the ILAE to refine and standardize its conflict of interest policy. The Task Force on Conflict of Interest, led by Michel Baulac, has proposed a new policy and disclosure statement for the ILAE which is currently under consideration by the League’s Commissions.

Samuel Wiebe
Secretary-General
The first calendar year of this Executive, 2010, was a busy one. Many new initiatives were undertaken by the League and staff was pleased to pay a role in the development and implementation of new programs and services.

The following stand out as major accomplishments over the past twelve months:

- Integrated VIREPA, the distance education program formally organized by EUREPA into the ILAE educational program.
- Developed a Web-based system to streamline the application and registration process for the VIREPA distance education program.
- Created a bursary database to catalog the different bursaries and recipients of bursaries supported by the ILAE.
- Established a Budget Review Task Force to evaluate and prioritize Commission projects.
- Worked with the Commission Chairs to help them develop their plans and budgets for the next term. Staffed the Commission Chair meeting held in San Antonio, Texas, USA.
- Finalized the move of the Chapter Services Office from Brussels, Belgium to Dublin, Ireland. Provided training and orientation to new staff.
- Further refined the Commission Operations Manual.
- Created an online system to facilitate the submission and review of Disclosure Statements.
- Established discussion groups in ILAE Community, the League’s online community, to facilitate and archive communication for each Commission, Committee and Task Force.
- Initiated the Website Redesign Project to improve the appearance and navigation of the ILAE website and to provide Commission-specific websites.
- Expanded the League’s conference calling capacity and created an online conference call calendar to enable Commissions, Committees and Task Forces to schedule conference calls without conflicts.
- Created a Finance Advisory Sub-Committee to advise the Finance Committee on the League’s investment policy and performance as well as other financial issues.

Priscilla Shisler, M.Ed., joined the staff team early in 2010 with 20 years of experience in the field of education. Priscilla brings to ILAE a strong background in program development, implementation, and evaluation of continuing medical education programming for a large international medical society. This included coordinating faculty and multiple committees in all phases of program development and implementation, ensuring that programming was fully compliant with stringent regulatory and accreditation standards and that program effectiveness was evaluated on a continuous basis. She is a graduate of Baylor University with a BS in Secondary Education and a Masters in Educational Psychology. She is a member of the American Society for Association Executives.

Priscilla serves as Leadership Liaison to the Executive Committee, staffs the Education Commission, is assisting with the Website Redesign Project, and works with the Commissions on communication via ILAE Community.

My sincere thanks to the rest of the ILAE staff team – Donna Cunard, Gus Egan, Carla Glynn, Cheryl-Ann Tubby and Emily Anton for their hard work on behalf of the League this past year.

Donna Cunard serves as the League’s Financial Manager and works closely with the Treasurer. Donna oversees all of ILAE’s financial transactions and the production of the monthly financial statements. She also liaises with the League’s accountant on the preparation of the annual tax return and Audit report.

Gus Egan and Carla Glynn are based in the Dublin, Ireland IDM Office. They work primarily with the League’s 108 Chapters, coordinating the Regional Chapter Conventions, maintaining the Chapter database, liaising with the Secretary-General on the processing of new Chapter applications and promoting the League through the use of the booth.

Cheryl-Ann Tubby is the primary staff contact for the League’s Information Officer. Cheryl-Ann coordinates the production and distribution of the League’s newsletter, Epigraph, and the Annual Report.

Emily Anton provides meeting planning support for the Commissions on an as needed basis.

Staff looks forward to 2011 and will build upon past efforts in support of the ILAE’s Executive Committee, Commissions and Chapters.

Peter J Berry, CAE
Chief Staff Officer
FIRST VICE PRESIDENT’S REPORT

The summary of my activities during the last 12 months is as follows:

**Chair of the Constitution Task Force**
The Aim of the Task Force is the amendment of the Constitution and the Bylaws of the International League Against Epilepsy (ILAE). The members of the Task Force are Drs Michel Baulac, Marco T Medina, Simon Shorvon and Samuel Wiebe. The ILAE has achieved worldwide success over the first century of its existence. This success is reflected by the growth of regional activities and collaboration among different regions (Asia/Oceania, Europe, North America, Latin America, Eastern Mediterranean and Africa). To better represent its constituency, the League is considering amending its Constitution to ensure participation of all Regions in the governance of the League at the highest level with membership to the Executive Committee and its acting branch, the Management Committee. Through the previous term (2005-2009), Drs Emilio Perucca, Nico Moshé and other members of the Executive Committee had been finalizing a number of proposals for the ILAE Constitution. The present Task Force took over this hard work and frequent meetings were performed during the past year.

The proposal of Constitution Amendment by the Task Force was approved at the Executive Committee Meeting on 26 March 2010 in Ghent. The goal is to have the Constitution Amendments drafted and presented at the 2011 Rome International Epilepsy Congress’s General Assembly. The new structure would then be implemented for the 2013 Executive Committee election. Further amendment of the Bylaws along with the Constitution is now in the progress.

**Collaboration with the Work of Task Forces and Commissions**
As a member of the Conflict of Interest Task Force, the EC Liaison Officer of the Diagnostic Method Commission and the EC Liaison Officer of the Commission of Asian Oceanian Affairs, many collaborative works were performed during the past year. The 8th Asian Oceanian Epilepsy Congress (AOEC) in Melbourne 2010 was a great success. The next 9th AOEC will be held in Manila in 2012. The Scientific Organizing Committee has already started its activities.

Tatsuya Tanaka
First Vice President
Among the many activities undertaking curing 2010, two are described in more detail below, because of their global relevance:

1) Budget Review Task Force
Chair: Michel Baulac, Members: Alicia Bogacz, Judit Jerney, Cigdem Ozkara, Shih Hui Lim, Gary Mathern, Christoph Pachtlatko, John Swann.

The Budget review Task Force emerged from the Strategic Plan Task Force. This Task Force was created in order to implement the principle of peer-review to every project that has a budget request from the League. Concretely, it operates when the diverse ILAE Commissions and Task Forces submit their projects and budget requests to the Treasurer and the Executive Committee. Every project is then evaluated and scored by the Budget Review Task Force using the following criteria:

- Contribution to the Strategic Plan
- Methodology
- Synergy with other Commissions or Regions
- Timelines and milestones
- Deliverables and impact on the field
- Appropriateness of the financial plan, including co-financing.

A global score is given to each project, and the list of scores is transmitted to the Treasurer and the Executive Committee, informing and facilitating the decision-making process in allocating funds. In addition, this global view permits us to identify potential synergies and to limit some redundancies among the projects.

2) Conflict of Interest (COI) Task Force
Chair: Michel Baulac, Members: Marco Medina, Steve Schachter, Tatsu Tanaka, Peter Wolf.

The ILAE represents expertise and a source of authoritative information to those inside and outside the field of epilepsy, including physicians, patient associations, governmental and international administrations, and the public in general. Because of its preeminent position, the ILAE must ensure that its recommendations and policies are not influenced by any financial interests, whether they concern individual members or the organization as a whole. The ILAE requires every one of its officers, members or partners to be continuously aware of the potential for COI that may arise at any point in the course of activities. These include educational and research programs, organization of congresses, advocacy initiatives, ILAE guidelines, publications and media and web activities.

The ILAE and its COI Task Force have elaborated a Policy on Conflict of Interest, which includes a “code of conduct” of the League as an organization, and a procedure of disclosure of conflicts of interest that concerns every individual ILAE member or participant in activities of the League.

The implementation of this policy on COI is in progress. The policy has been designed and circulated widely for feedback. A web-based interface for completing the disclosure form online is being developed. The procedures for reviewing the individual disclosure statements, will involve the Management Committee, the COI Task Force, and the concerned Regional Commission. For Congresses, the Scientific Advisory and Organizing Committee will be in charge of the COI disclosure statements, but will have the possibility to refer any problematic situation to the committees previously mentioned.

This Policy was calibrated to be applicable and acceptable to the diverse World regions where the League operates. Ultimately, this Policy will result in recommendations made to the ILAE Chapters. Many countries have legislation in place that regulates the relationship between professional medical associations, physicians and commercial sponsors. In such countries, the ILAE recommends following whichever policy, ILAE or country-specific, has the most restrictive requirements.

By complying with these rules and procedures, every World ILAE Region and every Chapter will contribute to protecting their and the ILAE’s reputation and integrity.

In addition to the activities described above, I have been actively involved in a number of Regional and Topic Oriented Commissions, either as liaison to the Executive Committee or as a participant, and in the reorganization of Europe-specific projects, such as EUCARE.

Michel Baulac
Second Vice President
During 2009 to 2010 I have worked in the following main ILAE activities:

**Strategy and Action Plan for Epilepsy: A PAHO/ILAE/IBE Project**

In 2010 the Pan-American Health Organization (PAHO) Mental Health Representative, Dr Jorge Rodriguez, the ILAE Third Vice-President, Dr Marco T Medina and the IBE Vice-President, Dr. Carlos Acevedo were appointed as members of a Commission to establish a Strategy and Action plan for Epilepsy in the Americas. This is the first time in more than 100 years of the PAHO that epilepsy will become a health priority in the Americas. We expect this project to be approved by the PAHO Assembly (Ministers of Health from the Americas) in Washington in September 2011. In drafting the Strategic and Action Plan, this Commission has asked for input from the ILAE and IBE Latin American Commission, the North American Commission, the Global Campaign Against Epilepsy, ILAE and IBE Executive Committees, and PAHO members, among others.

**ICD-11 Task Force**

The International Classification of Diseases (ICD) provides a public global standard to organize and classify information about diseases and related health problems. ICD is a member of the World Health Organization International Classification System which provides the basic building blocks for health information systems. The WHO is working on the new ICD-11. A topic advisory group (TAG) in Neurology was formed in consultation with the WHO. The TAG met first on June 22-23, 2009 to review categories in the ICD that relate to neurologic diseases. The TAG also formulates definitions and diagnostic criteria and suggests changes to the classification structure. Drs Ettore Beghi (Chair), Donna Bergen and Marco T Medina were appointed by the WHO to work on the epilepsy linear structure and classification of the new ICD-11 codes. This Commission has consulted with ILAE leadership and ILAE experts in preparing and reviewing initial drafts. These were reviewed by advisors and the final drafts and content forms are currently under consideration.

**Commission on Latin American Affairs**

In 2009 and 2010, I worked very closely with the Executive Committee of the Commission on Latin American Affairs, mainly as liaison of the Executive Committee, and prominently, as Chair of the Latin American Academy of Epilepsy (ALADE), which is the academic arm of this regional commission. The members of the ALADE Executive Committee are: Elza M. Yacubian (Brazil), Patricia Campos (Peru), Silvia Kochen (Argentina), Francisco Rubio Donnadieu (Mexico), Alejandro Scaramelli (Uruguay), Esper Cavallheiro (Secretary, Brazil) and Marco T Medina (Chair, Honduras). During the Latin American Epilepsy Congress in Cartagena Colombia, ALADE offered courses and published educational materials. The courses were: Neurobiology, EEG, Epilepsy prevention, Advances in genetics and epilepsy, and Clinical trials. The first textbook of ALADE was *Semiología de las crisis epilépticas* (Seizures semiology) edited by Silvia Kochen (Argentina) and Elza Marcia Yacubian (Brazil).

**Other Commissions and Task Forces**

I have worked in three other important Task Forces and Commission: 1) Constitution Task Force. The members of the Task Force are Dr Tatsuya Tanaka (Chair) Drs Michel Baulac, Marco T Medina, Simon Shorvon and Samuel Wiebe. 2) Conflict of Interest Task Force: Michel Baulac, Prof. Peter Wolf: Marco T Medina, Steven Schachter and Tatsuya Tanaka, and, 3) the ILAE executive liaison to the Epidemiology Commission. The Commission began its activities by working on a document outlining standards for epidemiologic research in epilepsy. A meeting was held in Rhodes in 2010 to discuss this document and future activities.

Marco Tulio Medina
Third Vice President
The year 2009 was another success for our journal, Epilepsia. The Journal had a record number of approximately 1,000 full submissions with additional contributions to the Gray Matters section. Papers were accepted from all continents and the Journal now has truly global coverage. Epilepsia is now ranked 24 out of 156 neurology journals in the 2008 Thomas Reuters Journals Citation Report and the impact factor, for the first time, rose above 4 this year.

The Journal’s revenue increased 13% from 2008, primarily due to commercial reprint revenue more than doubling and an increase in advertising sales revenue amounting to about $90,000 additional dollars. Subscription sales fared less well due to global economic conditions. While the number of subscribers increased slightly overall, the value of those subscriptions declined due to foreign exchange rates. Given the overall performance of the account, the result is an increase in the earned royalty to ILAE from $851,000 in 2008 to $967,000 in 2009. The guaranteed royalty to ILAE in 2009 is $1,000,000.

In addition to the 12 regular issues of the Journal, 12 supplements were also published this year. A total of 4,396 editorial pages were published in 2009 including the following supplements:

- Supplement 1: Italian League Against Epilepsy
- Supplement 2: Posttraumatic Epilepsy: Treatable Epileptogenesis
- Supplement 4: Abstracts from the 8th European Congress on Epileptology – Berlin, Germany
- Supplement 5: Epilepsy Syndromes in Development
- Supplement 6: Abstracts from the 6th Joint Meeting of the German, Austrian, and Swiss Sections of the ILAE
- Supplement 7: Fifty Years of Landau-Kleffner Syndrome
- Supplement 8: Matching Treatments to Seizures and Syndrome. Annual Course American Epilepsy Society Annual Meeting, 2008
- Supplement 9: Epileptogenic Cortical Dysplasia: Emerging Trends in Diagnosis, Treatment, and Pathogenesis
- Supplement 10: 28th International Epilepsy Congress – Budapest, Hungary
- Supplement 11: Abstracts from the 2009 Annual Meeting of the American Epilepsy Society
- Supplement 12: Proceedings of the Innsbruck Colloquium on Status Epilepticus – Innsbruck, Austria

At the end of 2009, there were 768 institutional subscriptions with 52% of institutions opting for online subscription. In addition, over 3,792 libraries globally had access to Epilepsia through the consortia sales program. There were also 2,288 individual member subscriptions. The Journal’s articles were downloaded 2,048,221 times during 2009 via the Wiley-Blackwell Intersciences Platform, an increase of 31% compared to the previous year. In addition, there were 191,407 PubMed linkouts to Epilepsia articles. Traffic from PubMed accounts for 19% of Epilepsia’s online usage. By the end of 2009, the total number of readers registered for Epilepsia e-alert services increased to 2,322.

We are grateful to our Editorial Board and to the many other experts in the epilepsy field who volunteer their time to review manuscripts for the Journal. We remain particularly indebted to our Associate Editors, who are critically involved in maintaining high criteria for the manuscripts that appear in Epilepsia. The Associate Editors for the past year are: Ettore Beghi; Edward Bertram; Mark Cook; Michael Duchowny; Renzo Guerrini; Bruce Hermann; Philip Patsalos; Michael Sperling; Carl Stafstrom; Torbjorn Tomson; Annamaria Vezzani; and Matthew Walker. The Editorial Board, at the end of 2009 comprised 48 persons from 14 countries and these peer reviewers have provided unrivalled expertise to the Journal.

Production of Epilepsia is a complex challenge and requires the coordinated efforts of many people. We offer our sincere thanks to the staff at our publisher, Wiley-Blackwell, for their dedication to this enterprise. ILAE has entered into a new contract with Wiley-Blackwell, and we look forward to working with the publishing team for several years to come. We acknowledge especially, the contribution of Alison Labbate, our Publisher, and the careful, tireless and patient work of Cathy Krendel, our Production Editor. Within the Epilepsia editorial offices, important contributions have been made by Elizabeth Mobayed (who designs all our covers) and by Laurie Beninsig (who has coordinated materials submitted for our
EPILEPSIA REPORT (continued)

supplements, has overseen figure quality and consistency, and will be stepping into the role of Managing Editor). Most of all, on behalf of the Epilepsia community, the Editors-in-Chief would like to thank Alison Alsmeyer for her outstanding work as Managing Editor. She has been instrumental in leading us through a number of changes that the Journal has made over the past years, and the current success of Epilepsia reflects her many contributions. Alison stepped down from her position in October 2010 to pursue other challenges, and Laurie Beninsig has very ably taken over this role.

Epilepsia is dedicated to the general goal of advancing epilepsy research. Our ability to achieve that goal depends primarily on the authors who contribute their outstanding work to this Journal. We hope that the high quality, large distribution, and epilepsy-focused readership of Epilepsia will continue to make this journal a primary target for the best in epilepsy research.

Simon Shorvon and Phil Schwartzkroin
Co-Editors-in-Chief Epilepsia
The information officer of the International League Against Epilepsy has several defined responsibilities and a number of ad hoc assignments. The primary responsibilities include the oversight of the website and the editing and publishing of Epigraph, the League’s newsletter.

ILAE website: The ILAE website was initiated in 2000. Since its creation it has gone through several facelifts and reworkings, with the responsibility for managing the technical aspects of the site and the posting of new information lying with the office in Hartford. In 2010 several enhancements to the League’s web presence were made in response to requests for improved work flow within and among the Committees, Commissions and Task Forces. Higher Logic, a networking site, was implemented. Although not yet widely adopted by all working groups, those that do use it are finding it useful. It has also been used by members as a way of connecting with colleagues in other countries. The lack of full utilization lies in part with poor communication on our part regarding the existence of this tool as well as with an inertia on the part of potential users who are uncomfortable with the associated learning curve. For the coming year, we should make Higher Logic better known to the membership and working groups. We will also need to ease this step into the unknown by disseminating clear teaching steps.

In 2010 the decision was made to revamp the website. Because of the size of the task, it was clear that additional hands and skills were needed. Jean Gotman volunteered to lead this effort which is now underway. His report will more fully describe the current status of the design and the web needs, including the implementation of Higher Logic, which is a key aid to the function of the League’s Commissions and Task Forces. The following several paragraphs deal with a few of the website’s features from an historical perspective. They are presented to aid in the discussion of specific features of the site to help determine whether they should be included as part of our overall communication strategy.

The website serves a number of purposes: repository of information regarding the League’s organization and function, basic information regarding national Chapters (officers, contacts, chapter URLs), Commission reports, links to meeting web pages, access to educational material (including the latest revisions to the classification system) and archives of current and past publications. Not all of these resources are used, although many remain useful as a public repository of League information and as access to Chapters.

One resource on the website that members find useful is the database of the names of antiepileptic drugs used around the world. Originally designed and created by Dr Robert Fisher, this database has proved useful in this era of widespread international travel in which physicians are encountering patients who are taking medicines that have different names in different countries. The database allows a physician or patient to convert names across countries. This service requires ongoing updates and is dependent on information provided by all of the Chapters. As keeping the information up to date requires much effort on the part of Chapters and staff, the data cannot always be warranted to be current. If we wish to continue to support this tool, we need to develop other means of keeping the data current which are less burdensome.

Another feature that is very popular is the Epilepsy Bibliography, which is a regularly updated compendium of all available publications dealing with epilepsy in all languages. Over half the visits to the website come through the Bibliography and the AED database. To facilitate the updating of the database, the League has created a tool that will allow Prof Fukuyama to edit the content directly.

Two features that were recently added to the League’s website are the Bookstore and the Farewells sections. The first is a resource of information on epilepsy-related books so that members will know what is available. The League does not sell the books, but links to booksellers are provided. We contacted a number of publishers as well as authors of epilepsy books, and introductory offers of gratis placement were made. (The plan has been to make a small charge for the service). The response on the part of the publication industry has remained weak. We may need to either develop a new approach to this feature, or discontinue it.

The Farewells section contains the obituaries of past members and others who were involved in the epilepsy movement across the globe. The intent of this section is to inform the larger epilepsy community about the passing of colleagues, to celebrate their accomplishments in moving epilepsy care forward, and to create an historical archive of people who have helped improve the lives of patients with epilepsy. It was developed in part because of intermittent requests to Epilepsia to publish obituaries of national leaders in the field, but not necessarily internationally prominent leaders in epilepsy. Although open to anyone in the field, it has had variable success. Because this feature can serve as a repository for historically useful information, it should be continued, and we should continue to request contributions.

Epigraph: The newsletter of the ILAE was launched in 1994, and was intended from its inception to provide short summaries of ILAE activities and include occasional features of general interest to an epilepsy audience. Most importantly it is a means by which the
ILAE central office could communicate important events to members worldwide. Since 2006, Epigraph has produced four issues a year (three online and one print edition). In 2010, a print edition was published to be distributed at all of the Regional Congresses, usually with an insert that was appropriate for the Congress (Eastern Mediterranean, Latin American, European and Asian). The other online editions focused on League initiatives and goals, and also served to publicize accomplishments of our Chapters and Commissions. Epigraph will continue to align itself with overall League goals by publicizing important milestones and initiatives as well as national and international accomplishments.

**Issues for the Immediate Future**

A major issue that is facing the epilepsy community is the lack of recognition and support that epilepsy receives in relation to the impact of the disorder on the individual and society. The many epilepsy groups are now coming together to improve the situation through greater public awareness of the problem. This issue is now being addressed through several initiatives, including the current Institute of Medicine study in the US as well as the Pan American Health Organization. Both are intended to raise the visibility of epilepsy, which remains an invisible disorder. One of the goals for the coming year is to develop programs that will make epilepsy better known and have it recognized for the major public health issue that it is. Several steps have been taken. First, the publication of the report on the status of epilepsy in the European Region provided an excellent summary of the problem. We used the publication of this document as a means of introducing the topic to the editors of major medical journals (approximately 30) in the areas of neurology, psychiatry, pediatrics and general medicine by sending tailored letters along with the publication. We are in the process of doing the same for national health ministers. For the health ministers, we are tailoring the letters wherever possible to introduce the ministers to the Chapters and to complement the Chapter on its important contributions. Although there is a general template, the tailoring process does take time.

Because communications outreach is essential to making epilepsy known and because the efforts have to be continuous to have an effect, the League needs to give consideration to how best to use its international status to further the cause of epilepsy at the national and local levels.

In the last six months, we have been involved with a media company, Knowlera, to develop a series of epilepsy videos that can be used in media and news campaigns. To date seven scripts have been written (see attached) and we may develop three more. These videos are directed at the lay public, and are intended to be web appropriate (3 to 5 minutes, ideally less). Once the scripts are finalized, filming will begin. There will be a need for some medically-related video material to use as illustrations. Sheryl Haut and Lionel Carmant have agreed to assist with the video production as experts. We will also recruit a few patients out of the Washington, DC area to talk about the experience of epilepsy. We hope to start filming late spring or early summer.

Edward H Bertram III  
Information Officer
The ILAE/IBE/WHO Global Campaign Against Epilepsy (GCAE)

In 1997 the WHO, ILAE and IBE decided to join forces in order to raise epilepsy to a level of awareness that had not been achieved ever before. This partnership is the ILAE/IBE/WHO Global Campaign Against Epilepsy – “Out of the Shadows”, with as its mission statement: To improve the acceptability, treatment, services and prevention of epilepsy worldwide.

The objectives of the Campaign are:
• To increase public and professional awareness of epilepsy as a universal and treatable brain disorder.
• To raise epilepsy to a new plane of acceptability in the public domain.
• To promote public and professional education about epilepsy.
• To identify the needs of people with epilepsy at national and regional levels.
• To encourage governments and departments of health, to address the needs of people with epilepsy including awareness, education, diagnosis, treatment, care, services and prevention.

The ultimate goal of the Campaign is to close the treatment gap in epilepsy. To date, over 100 countries have developed activities under the Campaign!

In 2009, a Task Force was created with an aim to establish a Strategic Plan with action points to forward wider development of activities within the GCAE, and raise awareness of achievements. A Strategic Plan was finalized with four main goals:

1. To improve the visibility of epilepsy and the activities of the Global Campaign in all countries;
2. To promote activities of all epilepsy projects on a country and regional level;
3. To assess and strengthen healthcare systems for epilepsy; and
4. To increase partnerships and collaboration with other organizations.

It has become clear, however, that throughout the world there are many initiatives that could be interpreted as Global Outreach, for which there needs to be increased awareness, but such activities are not necessarily directed through the collaborative efforts of the GCAE. The Task Force was therefore renamed for ‘Global Outreach’ with a primary aim of raising awareness of global educational and service initiatives in epilepsy throughout the world.

ILAE/IBE/WHO Global Campaign Activities in the Year 2010

The year 2010 was a busy year for the ILAE/IBE/WHO Global Campaign Against Epilepsy as the list of activities below shows.

Global Campaign Website

The Global Campaign website, www.globalcampaignagainstepilepsy.org, was launched during the 9th European Congress on Epileptology in Rhodes, Greece in June 2010. Information about current activities, regional reports and updated information about demonstration projects can be accessed on the website.

Regional Reports on Epilepsy

Aims: – advocacy tool
– instrument for dialogue with governments, healthcare providers, etc.

Contents: – basic knowledge on epilepsy
– basic facts: epidemiological burden and available resources

Results: regional reports have been published in all WHO Regions

Eastern Mediterranean Regional Report on Epilepsy

On 4 March 2010, during the 2nd Eastern Mediterranean Epilepsy Congress, the Eastern Mediterranean Regional Report on Epilepsy – Epilepsy in the WHO Eastern Mediterranean Region: Bridging the Gap was launched in Dubai by the WHO Regional Advisor, Dr Khalid Saeed. The report is aimed at both lay and professional readers. It contains information on epilepsy epidemiology, needs and resources, thus providing an overview of the epilepsy situation in the Eastern Mediterranean Region. The results of a questionnaire on country resources for epilepsy are also included. It outlines the initiatives taken by ILAE, IBE, WHO and other partners through the Global Campaign Against Epilepsy to address the problems, defines the current challenges and offers appropriate recommendations. It is hoped that the information in the report will provide a spur for improving services at country level in the Region and that the report will serve as a potent advocacy tool for taking epilepsy “out of the shadows” in the Eastern Mediterranean Region.

European Regional Report on Epilepsy

On 26 August 2010, during the 12th European Conference on Epilepsy and Society in Porto, Portugal, the European Regional Report on Epilepsy – Epilepsy in the WHO European Region: Fostering Epilepsy Care in
GLOBAL CAMPAIGN (continued)

Europe was launched in the presence of Dr Matthijs Mujten, WHO Regional Advisor on Mental Health for the European Region. This report is part of a series of Regional Reports on epilepsy now published in all six WHO Regions. The reports have been developed as part of the ILAE/IBE/WHO Global Campaign Against Epilepsy.

The Fostering Epilepsy Care in Europe report addresses the current challenges faced in Europe and offers recommendations to tackle them, as well as providing a panoramic view of the present epilepsy situation across the continent and concludes that many aspects of epilepsy care are seriously under-resourced. This report attracted much publicity from the general press as well as from epilepsy-related journals, such as:

- The Lancet (editorial)
- Epilepsia (Gray Matters)
- World Neurology (WFN Newsletter)

Copies are being disseminated widely. Members can request more copies from the GCAE Office in Heemstede (250 copies have been shipped to the ILAE office in Hartford). All reports are available on the Global Campaign website www.globalcampaignagainstepilepsy.org.

Demonstration Projects

General Objectives:
- Reduce treatment gap and social and physical burden
- Educate health personnel
- Dispel stigma

Ultimate goal: Development of a variety of successful models of epilepsy control that can be integrated into the health care systems of participating countries and regions and, finally, applied on a global level. Projects are being initiated in Cameroon, Ghana, Honduras and India. One project is ongoing in Georgia and this project will be finalized in 2011.

Project on the Burden of Epilepsy

The Global Burden of Disease (GBD), Injuries, and Risk Factors Study (1990) provides a complete systematic assessment of the data on all diseases and injuries. Within a new GBD project, comprehensive estimates of the burden of epilepsy, its disabling sequelae and its role as a risk factor for other diseases and injuries will be developed. This is part of the Global Burden of Diseases, Injuries, and Risk Factors Study 2010 led by Institute for Health Metrics and Evaluation at the University of Washington in collaboration with Harvard University, Johns Hopkins University, the University of Queensland, and the World Health Organization.

Specific Aims
1. To generate comprehensive estimates of the burden of disease due to idiopathic epilepsy
2. To generate comprehensive estimates of the burden of disease due to secondary epilepsy

The systematic review of the epidemiological data is being completed and the data is being synthesised and a database being established. The Global Campaign Against Epilepsy is contributing to the above process.

Resource Assessment for Epilepsy

In collaboration with the WHO Regional Office, a draft instrument for epilepsy resource assessment in Tajikistan is being developed within the Global Campaign Against Epilepsy. The draft has undergone multiple revisions to incorporate the comments from the working group and local stakeholders from Tajikistan. This will help in detailed situation analysis, better planning and strengthening of healthcare for better delivery of epilepsy services. The country specific instrument will also be helpful to later develop a generic version that can be used in other countries for resource and need assessment for epilepsy.

Re-visit Definition of Treatment Gap: Discussion on Plan and Timetable

The current definition of the treatment gap is: “The difference between the number of people with active epilepsy and the number whose seizures are being appropriately treated in a given population at a given point in time, expressed as a percentage”.

There has been some discussion about this definition and some have expressed the view that it is too simple. Some feel that the definition should address the issue of the interventions needed to ameliorate the gap. Other issues concern the availability of diagnostic and therapeutic issues (medication and surgery) as well as intervention on potentially preventable causes of epilepsy. Most would agree that before the treatment gap there is the diagnostic gap before which there is the prevention gap. From this perspective it could be argued that the so-called treatment gap should be replaced by discussions around the management gap (prevention gap + diagnostic gap + therapeutic gap = management gap). This is an issue that needs revisiting and would require robust discussion. A workshop has been proposed in order to deal with this issue.

Development of Guidelines for the Treatment of Epilepsy

Guidelines for diagnosis and treatment of epilepsy in adolescence have been drawn up in collaboration with the WHO Department of Child and Adolescent Health and Development, as part of the mhGAP intervention guide. These guidelines have been finalized and approved by the WHO Guideline Review Committee, and now are available at http://whqlibdoc.who.int/publications/2010/9789241548069-eng.pdf.

An algorithm was previously developed and published in Epilepsia in 2007 for diagnosis and treatment of neonatal seizures, especially in resource limited settings, aiming at clinicians in developing countries. Further systematic review of evidence has been
GLOBAL CAMPAIGN (continued)

completed and synthesised in order to develop neonatal seizure guidelines. These guidelines are in the final stages of publication.

Project on Legislation
This project aims to collect information on existing legislation and regulations related to epilepsy in the areas of civil rights, education, employment, residential and community services, and provision of appropriate healthcare, from countries all over the world, in order to review the comprehensiveness and adequacy of these legal measures in promoting and protecting the civil and human rights of people with epilepsy. Basic Principles for Epilepsy Legislation/Guidance, an instrument for developing, adopting and implementing epilepsy legislation is ready to go to print.

Regional Involvement in GCAE Activities
Regional Stakeholders meetings were organized in three Regions this year (AMRO, EMRO and EURO) with the participation of the WHO Regional Advisors for Mental Health of the relevant Regions to discuss future (common) Campaign activities in the respective Regions.

AMRO
The following issues were discussed:
- The Global Campaign had been launched in 1997 and over 100 countries organized activities under the Campaign.
- Epilepsy was one of the few diseases that received direct support from the WHO and the WHO had confirmed its interest in continuing its collaboration.
- It would be difficult to do a ‘volte face’ but it was necessary to highlight the fact that epilepsy can kill. Even more of a problem was finding a message that translated well into other languages, without losing impact.
- To date all Demonstration Projects had been in developing countries. There was a need to have a project in a developed country; when it comes to epilepsy every country is a developing country.
- The US Institute of Medicine prepared reports on different diseases that are used in policy-making. To date the Institute had not prepared a report on epilepsy. However, the Institute was now about to perform a study on epilepsy financed by the Department of Health. Many stakeholders are taking part, including the ILAE/IBE. The report might also be used by other health departments worldwide.
- The Pan American Health Organization (PAHO) is a specialized organization for health in the Inter-American System. It also serves as the Regional Office for the Americas of WHO. All states of the continent are members of PAHO, including the US and Canada. The main focus of the work of PAHO is the public sector, working with governments in preparing and accessing public policy plans. PAHO has country offices in 30 countries in the Region. A Strategic Plan for epilepsy from the program for Mental Health and Neurological Disorders was to be developed for implementation in Latin America.

In the meantime: an audit of resources is being prepared in South America and the assistance for support and resources is being identified. The following activities have already taken place:
- Initial brainstorming meeting in Cartagenia de Indias, August 2010
- Epilepsy agreed to be reviewed which involves representation from nine countries.
- A Strategic Action Plan in Latin America has been drafted.
- If approved, epilepsy will be on the agenda of Ministries of Health for the next 10 years.

EMRO
Activities in the Region:
- A major accomplishment in the EMRO Region was the development of the epilepsy regional report in collaboration with the WHO Regional Office and the GCAE secretariat.
- A public education booklet for epilepsy has been developed by the WHO regional office in Arabic and is being used in Saudi Arabia and Egypt.

Discussions included:
- Exploring the possibilities of Demonstration Projects in Egypt and Saudi Arabia.
- Investigating the feasibility of developing a project on advocacy for epilepsy at regional and international level.
- Exploring the possibility of including epilepsy training in ongoing training initiatives in the Region.
- Continuing the dialogue between ILAE and IBE regional structures and WHO Regional Office.

EURO
Presentations on the following topics were given followed by a response from the Regional Advisor and a general discussion:
- Report on activities of the European Regional Executive Committee (EREC) including membership development.
- General overview of activities in Western and Eastern Europe by various parties.
- Latin American initiative (Carlos Acevedo).

The following recommendations were agreed upon:
1. Identify other NGOs with similar objectives in order to try to join forces.
2. Find ways to translate educational materials in other languages, i.e. for neighboring countries or for population groups/minorities within countries such as migrants, prepare audio tapes or translate videos.
3. Common Message:
   a. Develop and disseminate a common message for all countries.
   b. Identify and approach appropriate target groups on national levels to disseminate the message.
4. When trying to improve epilepsy care:
   a. ensure inclusion projects in existing health systems.
GLOBAL CAMPAIGN (continued)

b. understand local beliefs/beliefs of minorities which is imperative when trying to improve epilepsy care.

5. When trying to position epilepsy in the regional health policy scene:
   a. join forces with other countries.
   b. mention number of deaths in epilepsy and preventable deaths.
   c. advertise low costs of actual treatment (important for resource poor countries).

6. Try to put epilepsy on the agenda of the WHO World Health Assembly

WHO mhGAP Mental Health Gap Action Program
Scaling up care for mental, neurological, and substance use disorders.
The essence of mhGAP is to establish productive partnerships, to reinforce commitments with existing partners, and to attract and energize new partners.

Vision
Effective and humane care for all with mental, neurological, and substance use disorders.

Goal
Closing the GAP between what is urgently needed and what is currently available to reduce the burden of mental, neurological, and substance use disorders worldwide by:
- Reinforcing the commitment of stakeholders to increase the allocation of financial and human resources; and
- Achieving higher coverage with key interventions especially in the countries with low and lower middle incomes.

The IBE and ILAE Presidents and Hanneke M de Boer were invited to participate in the second meeting of the mhGAP Forum “No health without mental health.”

Other participants included high government officials (such as ambassadors), partners (among which ILAE, IBE and SEIN for Epilepsy) and observers. As part of the preparations for the meeting, we were requested to prepare a report on our activities for inclusion in the meeting files and as part of the background material. The meeting was opened by WHO Director General Dr Margaret Chan. During this meeting the mhGAP Intervention Guide was launched http://whqlibdoc.who.int/publications/2010/9789241548069_eng.pdf). This Guide is a technical resource to support the implementation of mhGAP. Accurate but pragmatic algorithms are provided for use in primary and secondary care in the management of, for example, epilepsy. Following the launch a film was shown in which epilepsy and the project in China featured prominently. Both Nico L. Moshé and I gave short presentations on, respectively: Global Campaign for Epilepsy and Interventions for Epilepsy. Discussions took place on “Actions in Countries” and the day ended with a presentation by Dr Shaekhar Saxena, Director Department of Mental Health, followed by discussions on the “Way Forward.”

Hanneke M de Boer
Global Campaign Coordinator
Annual Congress Planning Update

During the year July 2009 to June 2010, the International Director of Meetings (IDM) Office has been actively engaged with the management and operation of the Congresses which took place during this period, in addition to the planning for future meetings.

The IDM Office has seen the successful organization of the 2nd East Mediterranean Epilepsy Congress, which was held in Dubai in March 2010 and the 9th European Congress on Epileptology, which was held in Rhodes in June/July 2010. Three Regional Congresses will take place before the end of 2010: the 6th Latin American Congress on Epilepsy in Cartagena in August, the 12th European Conference on Epilepsy & Society in Porto in August and the 8th Asian & Oceanian Epilepsy Congress in Melbourne in October. Work is underway on the international and Regional Congresses upcoming in 2011, 2012, 2013 and 2014.

Gus Egan from the IDM Office team is also overseeing ILAE membership services to assist the ILAE office in Hartford. In addition, the IDM Office has assisted in co-coordinating some of the activities of the Global Campaign Against Epilepsy with the GCAE secretariat office.

The 2nd East Mediterranean Epilepsy Congress (EMEC) was held from 4 to 6 March 2010 in Dubai, UAE. Over 290 delegates from throughout the East Mediterranean Region and beyond attended the Congress. The Scientific and Organizing Committee, co-chaired by Ahmad Beydoun, devised a Congress program with main sessions focusing on: “Safety and Monitoring of AEDs”; “Reflex Epilepsy”; “Video EEGs” and “Epilepsy in East Mediterranean Countries”. The program also featured the launch of the WHO Eastern Mediterranean Regional Report on Epilepsy. The Congress included a “Controversies in Epilepsy” course addressing questions such as: “Do we need driving regulations for patients with epilepsy?”; “First seizure: to treat or not to treat?” and “IGE, should EEG be used as a surrogate marker of drug efficacy?” Despite the short lead-in time to the Congress, the number of abstracts submitted to the Congress increased over the 1st EMEC in Luxor, with 86 accepted for presentation and, in the face of limited industry sponsorship, the Congress was a success on all levels.

The 9th European Congress on Epileptology took place in Rhodes, Greece from 29 June to 1 July 2010. The IDM Office worked in close collaboration with the International Organizing Committee, co-chaired by George Kostopoulos and Michel Baulac, and the Scientific Advisory Committee, chaired by Thanos Covainas, coordinating the scientific program and on-site logistics. The four main topics selected by the ILAE Commission on European Affairs were “Advances in techniques to delineate the epileptogenic zone”; “AED development, selection and use relevant to gender and age”; “Challenging the concept of idiopathic epilepsies” and “Predicting epileptogenesis: How far are we from reaching the goal?”. The Chairs’ Symposium, which was entitled “The paradoxes of the paroxysms: Seizure precipitating factors and underlying mechanisms”, was one of the most popular sessions of the Congress. There were three parallel series of courses each morning under the academic umbrella of EUREPA (How To Do? Teaching Sessions; Case-Oriented Learning Sessions on Practical Clinical Relevance; and Introduction Sessions to the VIREPA (Virtual Epilepsy Academy) Program). Video sessions introduced the technical side of seizure recordings and demonstrated the evaluation of the recorded seizure. The Greek National Seminar, organized by the Greek Chapter of ILAE, took place on the day before the Congress officially commenced. Over 550 abstracts were submitted via the online system. The Commission on European Affairs provided 50 travel bursaries to support the presentation of scientific papers at the Congress by Young Investigators and a Bursary Award Symposium highlighted work by six of the top authors. There was a strong emphasis on posters at the Congress and innovative poster tours took place each lunchtime, proving very popular, with key experts leading the tours. The European Epileptology Award 2010 was jointly awarded during the Congress to Martin Brodie (UK) and Yehezkel Ben Ari (Israel). Comprehensive negotiations with sponsors, many of whom had concerns about the location of the Congress, resulted in robust support and the presence of many sponsors and exhibitors.

The 6th Latin American Congress on Epilepsy will take place in Cartagena, Colombia, from 1 to 4 August 2010. The venue for the Congress is the Cartagena Hilton Hotel, close to the city center and the airport. The Scientific Advisory and Organizing Committee, co-chaired by Daniel Nariño, has worked hard to create a scientific program aimed at stimulating research in the field of epilepsy, enhancing patient care throughout Latin America and raising the profile of epilepsy in the Region. The main topics of the Congress are: “Neurocysticercosis”; “Legislation and epilepsy”; “Epilepsy surgery”; “Paediatric Epilepsy”; “Reproduction and epilepsy” and “Neuroimaging”. The scientific program includes six Plenary Sessions, six discussion group sessions, two satellite symposia and three breakfast sessions supported by industry. Five ALADE courses (Academia Latinoamericano de Epilepsia) have also been incorporated in the program. In addition two Platform Sessions will take place and
over 155 posters will be presented. A ‘Highlights’ session will close the Congress, giving an overview of the presentations. For the first time, all session audio and slides will be captured for publication on the web page of the ILAE Commission on Latin American Affairs. An IBE Day organized by the local IBE association will take place on 31 July at the FIRE Centre which should attract a great number of attendees. Over 700 participants are expected to attend the Congress from all parts of the Central and South American Regions.

The 8th Asian & Oceanian Epilepsy Congress took place in Melbourne, Australia from 21 to 24 October 2010. The venue is the Melbourne Convention & Exhibition Centre (MCEC) in the centre of Melbourne which opened its convention facilities in July 2009. A strong scientific program has been put together by Simon Harvey (Australia), Shih Hui Lim (Singapore), Shunglon Lai (Taiwan), Terence O’Brien (Australia) and members of the Scientific Organizing Committee (SOC) and Scientific Consultative Committee (SCC). The main topics of the Congress are: “Epilepsy Surgery – Who and When?”; “Outcome in Newly-diagnosed Epilepsy”; “Prevention of Symptomatic Epilepsy”; and “Psychological Well-Being in Epilepsy”. Changes to the program include fewer sessions in parallel, an opportunity for a late-breaking news session and more interactive workshops. An Epilepsy and Society Day will run in conjunction with the Congress. Over 320 abstracts were submitted via the online system. The Congress has been extensively promoted and there is good support from sponsors. Over 1,500 participants are expected to attend.

The 29th International Epilepsy Congress (IEC) will take place in Rome, Italy from 28 August to 1 September 2011. The Scientific Advisory & Organizing Committee has identified the following main topics of which each session will incorporate scientific and social components: “When do we consider epilepsy cured?”; “Impaired consciousness in epilepsy: Mechanisms and clinical significance”; “Epilepsy during puberty – the wonder years”; “Predicting the unpredictable: The adverse effects of treatment”; and “Older, slowing down and seizing up – epilepsy strikes again”. The Presidential Symposium will be entitled “Avoiding epilepsy deaths”. Each day of the Congress will also feature Parallel Sessions and Teaching Sessions. The scientific program is complete and information is available on the Congress website. The abstract submission system and online registration will be available in December 2010. The 29th IEC in Rome will mark the high point of a year of activities being planned by the International Bureau for Epilepsy to celebrate its Golden Jubilee in 2011, including the ‘Epilepsy Without Words’ photography competition, a poster display highlighting the initiatives and achievements of IBE’s member associations and a spectacular exhibition booth.

The 10th European Congress on Epileptology will take place in London, UK from 30 September to 4 October 2012. Preparations are already well underway for this Congress, which will take place after the Olympics and Para Olympics in the ICC London ExCel. The four main topics selected by the ILAE Commission on European Affairs are: “Imaging and pre-surgical evaluation”; “AED clinical pharmacology in adults and children”; “Basic and translational epileptology”; and “Epileptology and psychiatric problems in adults and children”. The Scientific Advisory Committee will meet in London in March 2010 to continue with planning the Congress program.

The IDM Office is also currently working on arrangements for the other Regional Congresses taking place in 2012 (3rd EMEC, 7th LACE, 9th AOEC), as well as the 30th IEC in 2013 and the 11th ECE in 2014.

Richard Holmes
International Director of Meetings
Task Force Reports
PAST PRESIDENT’S ADVISORY COMMISSION

Chair
Giuliano Avanzini

Members
Ted Reynolds
Pete Engel

The Commission was appointed in July 2009 by the ILAE President with the task of providing advice to the Executive Committee (EC) based on their experience as Past Presidents.

Advice on a constitutional matter related to the composition of the Election Commission was provided on request in July 2009. Moreover the members of the Commission felt it appropriate to exchange views about the ILAE policy in the light of their previous experience in the ILAE management. From this discussion the following considerations emerged that we now offer to the ILAE EC.

1. Assessing and meeting epilepsy-related needs. To fulfil its objective of “promoting prevention, diagnosis, treatment, advocacy and care for all persons suffering from epilepsy” (ILAE Constitution) the ILAE needs to take into consideration the disparities among different parts of the world. Over the years, the ILAE has been collecting many pieces of information through its two-way relationship with ILAE Chapters. The accuracy and completeness of the information and its updating is variable. It is suggested that the Regional Commissions interact with their Chapters to create and continuously update a map of the needs, which reflects the existing cultural and economical differences in the area. The results of such activity will further extend and deepen the scope of the GCAE.

2. Coordinating the Commission activities. We feel that clear assignments should be given to the topic specific commissions by ILAE EC, leaving open to them the possibility of elaborating on other issues that they may consider important. Moreover the work of the Commissions needs to be coordinated to avoid the redundancies and duplications that occurred in the past. This can be obtained by improving the two-way communication between ILAE EC and Commissions and between different Commissions using the new online Epilepsy community recently developed by the ILAE Higher Logic Task Force.

3. Identifying and highlighting research targets and results. Epileptology greatly benefited from the results of basic and clinical research. Among the many excellent papers published every year, it would be important to highlight the ones that mostly contribute in answering some crucial questions that are still open in our field. A specific mandate might be given to the Neurobiology Commission acting in collaboration with other Commissions to pick up clinically relevant results that actually advance our understanding and to identify crucial targets for research that may attract investigators. Interestingly, an effort to identify critical questions to be addressed by research is being made in the US and UK by the so-called “Centers without Walls” involving universities and other research organizations with which the ILAE Commission on Neurobiology could interact.

4. Reviewing and making available existing educational material. Many epilepsy centers have developed educational material that could be profitably used for courses organized in different parts of the world. Some years ago an ILAE Resource Centre was created in Zurich to collect, classify and make materials available to educational initiatives under the aegis of ILAE. To our knowledge this material has been ordered but not systematically reviewed by experts and probably never used. It seems important to assess the value (if any) of the stored material and to implement in a newly organized, easily accessible resource center any relevant educational tool that is currently being developed.

5. Giving to young epileptologists more chances to emerge. Several Chapters have been run by the same officers for many years, making it difficult for young, dynamic people to emerge. A justification that is often offered is that the Chapter is too small to allow rotation, which is not always true. We all had the chance (namely during international courses) to meet young enthusiastic epileptologists that are discouraged from being active in their national epileptologic community by their senior colleagues who seem to keep the leadership in perpetuity. The ILAE policy of involving active people in the work of Commissions and Task Forces or in international/Regional Conferences/ symposia is a useful corrective and should be pursued. In addition, we suggest the ILAE EC find a way to ensure a Constitutional turn-over of national officers as it is the case for ILAE officers. Should the number of people in a given country be too small to allow rotation, the solution could be either to merge several countries in a single Chapter or to create a system of individual affiliation to ILAE (maybe through the corresponding Regional Commission).

6. Reconsidering the proportion of reserve versus operating budget. Attention to protecting or increasing revenues, particularly with the continuing decrease in pharmaceutical contributions, is an important issue. However, we think that besides the expenses for infrastructure maintenance, all the ILAE money should be spent on projects except a reserve fund set apart for
contingencies. At present the proportion of money spent for projects seems rather low with respect to the total. We suggest the Executive Committee re-evaluate the criteria for setting a reserve fund limit, above which all the money will be used to support ILAE activities. For instance, we know from Pete Engel that WFN keeps only enough money in reserve to allow them to survive for two years if their Congresses lose money.

7. Collaborating with other associations of health professionals. Goal 1 of the ILAE 1999 Strategic Plan, Aim 1.1.2 mentions the need for “reaching out to health professionals ….. taking care of persons with epilepsy”, we think that ILAE should also aim to reach out to health professionals in other fields that might be relevant to epilepsy. This could be done by establishing better relationships with international organizations whose constituencies have some stake in epilepsy. Besides WFN and AAN and IBRO, with which collaborations already exist, other international neurological organizations can be considered along with organizations active in pediatrics, pediatric neurology, autism, stroke, brain tumors etc.

8. Revising and updating the WHO global burden of diseases study. In the original study, epilepsy was considered to constitute one percent of the global burden of disease based on disability-adjusted life years, which is equivalent to breast cancer in women and lung cancer in men. In that study, it was also equivalent to depression, dementia, and substance abuse. A more recent update, however, has put depression well ahead of everything else in most regions. Pete Engel recently learned that only “idiopathic” or “cryptogenic” epilepsy was included as epilepsy whereas when the cause was known it was listed under the cause. This means that the contribution of epilepsy to the global burden of disease has been tremendously underestimated by WHO. ILAE needs to advocate for a new study to accurately determine the burden of all epilepsy, regardless of its cause.

9. Relationship with industry. A working relationship between ILAE and the pharmaceutical industry is highly desirable. Both parties have much to contribute and much to gain, and the interests of people with epilepsy are better served by a well-constructed partnership between ILAE and industry, than by the sum of both working independently. It is however important to avoid any type of conflict of interest, real or imagined, as elaborated by two of us in an editorial in Epilepsia, which was based on the firm belief that benefits can be optimized and drawbacks minimized by clearly defining the respective roles of both parties and insuring that the relationship is fully transparent. We think that ILAE should devote more attention to this field continuously updating the existing guidelines and expanding them to all the many areas of interaction that now occur with drug companies at international and national levels.

10. Updating Global Campaign mission and organization (GCAE). We praise the effort of the present ILAE leadership to update the GAAE mission, because its specificity with respect to the ILAE mission was not always clearly perceivable in the past. The decision of linking the GCAE more strictly to the ILAE and IBE will make it easier to delegate to GCAE some aim of the Strategic Plan that will characterize it better and be perceived from the ILAE constituency as a specific GCAE activity. We also feel that the potential of GCAE for fund-raising initiative should be better explored. We don’t think too much about pharma but other private donors or foundations. The aim of getting the GCAE down to the Chapter level has not been yet attained, therefore many national activities that should be integrated in the GCAE remain unknown and uncoordinated. It is suggested that the ILAE encourage each Chapter to appoint an officer specifically responsible for liaison at regional and global levels. Particular attention should be given to the ILAE-IBE agreement with WHO to be sure that the agreed policy is not too dependent on the specific persons who are in charge at WHO. WHO is in fact a political body and the officers may change unpredictably and we must be sure that this will not affect the continuity of the joint strategies.
CONSTITUTION TASK FORCE

Chair: Tatsuya Tanaka
Members: Michel Baulac, Marco T Medina, Simon Sharvon, Samuel Wiebe

Aims
Amendment of the Constitution and the Bylaws

Mission
The International League Against Epilepsy (ILAE) has achieved worldwide success over the first century of its existence. This success is reflected by the growth of regional activities and collaboration among different Regions (Asia/Oceania, Europe, North America, Latin America, Eastern Mediterranean and Africa). To better represent its constituency, the League is considering amending its Constitution to ensure participation of all Regions in the governance of the League at the highest level with membership to the Executive Committee and its acting branch, Management Committee. The goal is to have the Constitution amendments drafted and presented at the 2011 Rome International Epilepsy Congress. The new structure would then be implemented for the 2013 Executive Committee election.

Commission activities from July 2009 through July 2010
July 2009, Task Force Meeting in Rhodes
March 2010, Task Force Meeting and Executive Committee Meeting in Ghent
June 2010, Task Force Meeting in Rhodes

Frequent discussions about the Constitution amendment during the international telephone conferences of the Executive Committee.

Accomplishments (2009-2010)
The proposal of Constitution amendment by the Constitution Task Force was approved by the Executive Committee Meeting on 26 March 2010 in Ghent.

Recommendations for Future Work
Proposal of the Constitution amendment by the Executive Committee will be prepared for the approval of the General Assembly in Rome International Epilepsy Congress 2011. Further amendment of the Bylaws along with the Constitution is now in the progress by the Constitution Task Force.
Regional Commissions
COMMISSION ON ASIAN AND OCEANIAN AFFAIRS (CAOA)

List of Members and Officers:
As of November 2010, CAOA takes charge of 18 Chapters in the Asian and Oceanian Region, which includes Australia, Bangladesh, China, Hong Kong, India, Indonesia, Japan, Korea, Malaysia, Mongolia, Nepal, New Zealand, Pakistan, Philippines, Singapore, Taiwan, Thailand, and Vietnam (formally accepted in June 2009 during the 28th IEC in Budapest).

Nomination and election of the CAOA 2009-2013 elections were carried out in the second quarter of 2009. New members of CAOA took office officially in July 2009 and a member representing India (V Nadkarni), Chair of CAOA Research Task Force (P Kwan), and Chair of Regional Committee of GCAE (E Somerville) newly joined the Commission as Ex-Officio.

Officers of CAOA (2009-2013)
Chairman Byung In Lee (Korea)
Secretary John W Dunne (Australia)
Treasurer Jing-Jane Tsai (Taiwan)
Information Officer Sunao Kaneko (Japan)
Members Hasan Aziz (Pakistan)
Shi Chuo Li (China)
Chong Tin Tan (Malaysia, Chairman of ILAE-Education Commission and ASEPA)
Shih-Hui Lim (Singapore, Chairman of CAOA, 2006-2009)
Ex-Officio Tatsuya Tanaka (Japan, ILAE – First Vice President)
Vrushali Nadkarni (India)

Task Forces
1. Research Task Force
   Patrick Kwan (Hong Kong)
2. Global Campaign Task Force
   Ernest Somerville (Australia)

The Asian Epilepsy Academy (ASEPA) was formed in 2003, initially as the educational arm and now a sub-commission of CAOA. The composition of ASEPA is shown below.

Officers of ASEPA (2007-2011)
Chairman Chong Tin Tan (Malaysia)
Secretary Andrew Bleasel (Australia)
Members Gourie Devi (India)
Yushi Inoue (Japan)
Weiping Liao (China)
Shih-Hui Lim (Singapore)
Ex-Officio Byung In Lee (Korea; CAOA Chair)

Aims:
The aims of CAOA, the Regional Commission of ILAE, are to develop, stimulate, and coordinate the epileptology agenda in the Asian and Oceanian Region.

Mission:
a. To advance and disseminate knowledge concerning the epilepsies throughout the Asian and Oceanian Region;
b. To improve education and training in the field of the epilepsies in Asia via the formation of the Asian Epilepsy Academy;
c. To organize the Asian and Oceanian Epilepsy Congresses together with the International Director of Meetings (IDM) and IBE’s Regional Executive Committees;
d. To facilitate clinically relevant epilepsy research in Asia;
e. To serve as a link between ILAE, IBE, WHO, and regional medical organizations to promote prevention, diagnosis, treatment, advocacy and care for all persons suffering from these disorders in the Asian and Oceanian Region;
f. To promote the activities of local Chapters, encourage similar policies and administrative structures and facilitate their involvement within the global ILAE agenda;
g. To review epilepsy services and the size of the treatment gap in each country and aim to improve the former and reduce the latter.

Action Plans of CAOA: 2009-2013
The following were formulated at the CAOA business meeting at Seoul, 26 September 2009, and presented/accepted at the Commission Meeting of ILAE in Paris, 22 – 23 October 2009.
1. Construct CAOA and ASEPA website with a link with ILAE and regional Chapter’s websites, and publish a newsletter.
2. Enhance education and training efforts and activities that
   (i) continue to provide teaching courses and workshops in Regions in need.
   (ii) provide epilepsy fellowship (6 months) for the nurturing of future epilepsy specialists of the Region.
   (iii) continue to conduct EEG certification examination for the purpose of elevating the standard of EEG recording and interpretation skills.
3. Organize the Asian and Oceanian Epilepsy Congresses every two years.
5. Promote new Chapter formation.
6. Facilitate Global Campaign Against Epilepsy (GCAE) activities.
7. Facilitate interactions and communications among Chapters and Commissions.
8. Initiate the “Asian and Oceanian Outstanding Achievement Epilepsy Award.”

Commission Activities:

1. Communication and Business Meetings
   a. Communication among members of CAOA and ASEPA were mainly through e-mails and during teaching courses/workshops/Congresses in the Region. In addition, CAOA business meetings were held on the following occasions:
      i. Initiation Meeting of new CAOA in Seoul, Korea, on 26 September 2009
      ii. CAOA meeting for the 8th AOEC in Bangkok, Thailand, on 28 October 2009
      iii. CAOA meeting (informal) at Hanoi, Vietnam, on 16 April 2010
      iv. Joint CAOA and ASEPA meeting on 21 October 2010, in Melbourne, Australia, during the 8th AOEC (scheduled)
   b. Communications with ILAE are also being made, mainly through e-mail and during Congresses of local, regional, or international levels.
      i. Meeting of the ILAE Regional and Topic Commissions in Paris, France, 22 – 23 October 2009
      ii. Meeting for the budget of Commissions at the AES meeting in Boston, USA, 3 December 2009

2. Liaisons of Seven Task Forces of the Therapeutics Strategies Commission for 2009-2013
   a. Patrick Kwan for New Strategies of Clinical Therapeutic Studies
   b. Shih Hui Lim for Emerging Technologies for Treatment of Epilepsy
   c. Jing-Jane Tsai for Behavioral Treatments
   d. Shi Chuo Li for Treatment Gap
   e. Byung-In Lee for Surgery
   f. Vrushali Nadkarni for Drugs
   g. John W Dunne for Natural Products

3. Asian and Oceanian Outstanding Achievement Epilepsy Award (AOOAEA)
   The First AOOAEA was endowed at the Opening Ceremony of the 8th AOEC.
   Awardees of the First AOOAEA were:
   H Aziz (Pakistan)  T Tanaka (Japan)
   K Yagi (Japan)  P Satish Chandra (India)
   X Wu (China)

4. CAOA Website
   CAOA information committee meeting
   (Chair, S Kaneko, 23 October 2010)

   CAOA website [http://www.caoa-epilepsy.org] opened with excellent feedback. It is linked to the ILAE website. The target audience is doctors treating epilepsy. Links to each Chapter website in AO Region will be made and content needs to be reviewed every six months. Maintenance costs are $1,500 per year. We are considering adding information on Committees and a listing of Chapter officers. Content includes:

   • Nature of CAOA including membership structure and contact details
   • Proceedings and abstracts of AOEC
   • Profiles of outstanding award winners and its process
   • History of epilepsy in the Region, local Chapter activities, Global Campaign activities, ASEPA materials and educational resources from workshops and Congresses
   • CAOA newsletters in PDF

5. CAOA-RTF
   a. Meeting at Rhodes (ECE) on 28 June 2009
      i. Taisuke Otsuki to replace T Tanaka
      ii. CT Tan and SH Lim added to the Task Force
      iii. Online directory of researchers in our Region being set up on the CAOA website (W D’ Souza working on the questionnaire)
   b. Meeting at the 8th AOEC on 22 October 2010 at Melbourne
      i. Review of Research Priorities Documents of European and US colleagues
      ii. Agreed upon the following priority research areas
         (1) improving research infrastructures;
            (i) research capacity, (ii) techniques, (iii) network within and outside Region, (iv) funding
         (2) understanding etiologies and epileptogenesis:(i) Pathologic basis of epilepsies in the Region, (ii) etiologic/modifying factors, (iii) lifestyle risk factors, (iv) genetics, (v) disease susceptibility, (vi) regulatory framework, (vii) ethics
         (3) Lessening psychosocial comorbidities: (i) quality of life, (ii) impact of culture/social perception on epilepsy care/outcome
         (4) Better treatment outcomes: (i) closing treatment gaps, (ii) healthcare delivery, (iii) drugs/pharmacogenomics, (iv) surgery, (v) other therapeutic modalities, (vi) health economics
COMMISSION ON ASIAN AND OCEANIAN AFFAIRS (CAOA) (continued)

iii. Plans
(1) circulation of priority framework to CAOA Chapters
(2) a one-day stand alone meeting of Task Force members in 2011. To save traveling expenses, the meeting may be held in conjunction with one of ASEPA meetings (possibly in Taipei on 1 July 2011 before the workshop on Status Epilepticus)

6. GCAE
a. Meeting of CAOA-GC Task Force (Chair, Ernie Somerville) on 22 October 2010
How to reduce the treatment gap in AO Region?
   i. gathering information about what’s going on in each country; more than 10 Chapters gave a brief presentation about their own works against epilepsy
   ii. discussion about how to identify sources of funding and key partners
b. GCAE parallel session at the AOEC on 23 October 2010

7. 8th AOEC: 21-24 October 2010, Melbourne, Australia
a. Abstracts totaled 317 with 1,436 registered delegates and 252 registrations for the pre-Congress workshops
b. Twenty-eight bursary recipients and four partial sponsorships
c. Travel support to four delegates for Chapter convention
d. Scientific programs were evaluated as excellent (109 speakers/chairs; 12 were non-regional) They included: Chairman’s Symposium and three Main Sessions; M Seino’s Memorial Lecture; five Didactic Lectures; three post-main Sessions and eight parallel sessions; two video sessions, two workshops, two debates and three Satellite symposia.
ASEPA workshops (pre-Congress); Clinical epilepsy I & II; Neurobiology: methods of animal experiments
e. Tadokoro’s Prize;
   Oral 1. C Suhr et al (Australia)
   Poster 1. TH Kim et al (Australia)
      2. G Shukla et a (India)

8. 9th AOEC
a. Venue; Philippines (probably Manila) in March 2011
b. President of Philippine Epilepsy Society; Dr J Casanova-Gutierrez
c. Scientific and Organization Committee (SOC):
   Co-Chairs: Bl Lee (CAOA), R Cole (IBE), J Casanova-Gutierrez (PES); Members: S Harvey (President of 8th AOEC), P Kwan (CAOA), T Tanaka (ILAE), V Saxena (IBE), A Pan (IBE), D Ding (IBE)
d. Initiation Meeting of SOC on 23 October 2010 at the 8th AOEC
   i. Website address will be www.epilepsymanila2012.org
   ii. Proposal of session titles for Main Session: Epilepsy Networks, Genetics, Epilepsy in developing brain; Complications of Epilepsy; and Advances in Epilepsy Treatment
   iii. Proposals for Parallel sessions, Practical sessions, epilepsy and Society programs, and other suggestions were made
iv. Registration fee for the 9th AOEC was tentatively set up similar to the 8th AOEC at Melbourne; For Early Registration; Senior: $300, Trainee/non-physician: $150, subsidized registration: $150
v. Next meeting of SOC is tentatively scheduled in February 2011 at Manila Organization of Scientific Consultative Committee (SCC)
   Chairs: John Dunne (Australia) and Leonor Cabral-Lim (Philippines)
   Members:
   Australia: Ernest Somerville (CAOA), Andrew Bleasel (ASEPA), Terry O’Brien, G Shears (IBE), D Chapman (IBE)
   China: SC Li (CAOA), WP Liao (ASEPA), J Qin, G Luan
   India: V Nadkami (CAOA), MM Mehndiratta, K Radhakrishnan, S Jain
   Japan: S Kaneko (CAOA), Y Inoue (ASEPA), A Ikeda, M Watanabe
   Korea: HD Kim, SB Hong
   Malaysia: CT Tan (CAOA)
   New Zealand: P Bergin
   Pakistan: H Aziz (CAOA)
   Philippines: M Ortiz, Felicidad Soto, V Bael, Jeanie Desiree Khgonhun (IBE)
   Singapore: SH Lim (CAOA & ASEPA), A Ikeda, M Watanabe
   Thailand: Y Chinvarun, A Visudiphan
   Taiwan: Jing-Jane Tsai (CAOA), Yung Yang Lin, Yuan-Fu Tseng (IBE)

9. ASEPA
Major activities:
   a. Workshops/Teaching Courses:
      July – December 2009; 11 courses
      January – December 2010; 12 courses
   b. Fellowships offered:
      2009; five Fellows – Two for Shizuoka, two for ASEPA, and one for ESA 2010; four Fellows – two for Shizuoka, two for ASEPA
   c. EEG certification Exam (by SH Lim):
      Part I - 2009, Kuala Lumpur (n=10), Beijing (n=153) 2010, Singapore and Bandung (n=34)
      Part II - 2009, Hong Kong (n=11) 2010, Singapore and Nanchang (n=77)
COMMISSION ON ASIAN AND OCEANIAN AFFAIRS (CAOA)  
(continued)

10. Chapter Convention: 21 October, 2010, Melbourne Convention Center
   a. Present: ILAE Executives, CAOA members, Reps of AO Chapters (17 Chapters except Mongolia, and Uzbekistan), and invited countries (Myanmar and Sri Lanka)
   b. Issues: need to change the perceptions on epilepsy to gain the support required to reduce the treatment and knowledge gaps and appropriate social advocacy
   c. Collaboration with related organizations is crucial and should be encouraged
   d. Proposed change in the ILAE Constitution related to the ILAE leadership; including Regional Chairpersons of the Regional Commission on the Executive as voting members
   e. Reports from CAOA and ASEPA
   f. AO Outstanding Achievement Epilepsy Award
   g. J Gutierrez (President of PES) announced that PES is happy and satisfied with the hosting of 9th AOEC in Manila, which is a safe cosmopolitan city
   h. Proposals providing financial support for delegates from Resource Poor Chapters; (1) Bursaries, (2) CAOA budgets, (3) Congress budget-supporting for the Chair of didactic lectures (usually five)

Projects and Plans for 2011:

1. Activation and expansion of communications between CAOA and Chapters in the Region
   a. Improve and update website linking to each Chapter
   b. Organize Information Committee consisting of Information Officers of local Chapters

2. Activation of RTF
   a. Networking of researchers and research centers of the Region
   b. Circulation of Research Priority Framework
   c. Planning and execution of future tasks at a stand alone meeting 1 July 2011 at Taipei

3. Launch GCAE in the Region
   a. Circulate the compilation of each presentation given at GCAE meeting at Melbourne
   b. Continue the support an epilepsy project in Laos, coordinated by Dr H Barennes:
      i. monetary support ($5,000/year)
      ii. expand education programs of young neurologists (one Laotian doctor is under training by CT Tan at present)
   iii. need to set up more specific target projects by interacting with ILAE-IBE-WHO
   iv. one face to face meeting every year may be planned

4. Preparation of 9th AOEC
   a. SOC 2nd Meeting is scheduled on 25 February 2011, at Manila
   b. Timeline: 1st announcement in January 2011
   c. Online registration and abstract submission in June 2011
   d. Deadline for abstract submission in November 2011

5. Expansion of ASEPA Activities
   a. Collaboration and networking with local Chapter activities: Considering the incorporation of ASEPA program in Annual Congress of major Chapters
   b. Support for Epilepsy School in China: Support two to three speakers from ASEPA to the Epilepsy Summer School
   c. Promotion of ANZAN EEG teaching course to the ASEPA program: 13-14 May 2011, in Bangkok, Thailand

6. Promote Inter- and Intra-Regional Collaboration
   a. Collaboration with Asian Epilepsy Surgery Congress (AESC)
      i. Consider Epilepsy Surgery Task Force in CAOA
      ii. May have joint symposium and provide two to three speakers from ASEPA
   b. Collaboration with Infantile Seizure Society (ISS)
      i. Consider Pediatric Task Force in CAOA
      ii. May have joint symposium and provide two to three speakers from ASEPA
   c. Collaboration with other Regions
      i. Consider exchanging speakers (two to three) from each Region for the Regional Congresses of the counterpart
      ii. Seek joint research projects
The Commission on Eastern Mediterranean Affairs (CEMA) consists of members from different countries in the Eastern Mediterranean Region who have expertise in care and education in epileptology.

**List of Members:**

**Chair**
Ahmad Beydoun

**Members**
Adel AL Jeshi
Hassan S. Hosny
Jihad S. Inshasi
Ahmad Khalifa
Sonia Khan
Chahnez Triki
Saoudi Zemrag
Michel Baulac, M.D., EC Liaison

**Aims:**

- To identify research and education priorities in epilepsy for the Eastern Mediterranean Region (EMR)
- To establish standards and guidelines for research activities within the EMR
- To support partnerships and exchange information between academics in different countries in research and educational activities
- To improve the quality of research and education in the EMR

The Commission will:

- Propose research projects individually or federated between different countries, pilot and evaluate the projects.
- Organize training seminars for the young researchers. These will focus on activities such as learning how to conduct epidemiological studies, how to write research proposal/projects, and how to write a scientific paper.
- Organize a forum for research when all researchers of the region display their work.
- Organize workshops on specific topics in epilepsy.
- Organize and propose training for researchers in accredited laboratories or departments.

In order to determine the list of priorities, CEMA will identify:

- What has been done as research in the Region.
- What are the priorities and topics to be undertaken in the Region.
  - Which countries in the Region have teams that are actually involved in research in the field of epilepsy. This will include both clinical and basic science.

**New Taskforces and Their Missions:**

1. **Information Source Task Force**

   **Aim 1:** Establish systematic reviews for the manner in which medical and other health professionals in CEMA countries diagnose and treat persons with epilepsy. Dr Shireen Qureshi from Aramco, Saudi Arabia will have responsibility for this.

   **Aim 2:** Serve as an informational resource to national and regional groups as they develop statements regarding prevention, diagnosis, and treatment of epilepsy that are based on best medical evidence, while providing for regional variability and cultural needs. Dr Sonia Khan from Saudi Arabia will have responsibility for this.

   **Members:**
   - Sonia Khan, Head of the Task Force
   - Members include:
     - Faisal Al Suwaidan, Saudi Arabia
     - Ahmed Al Rumayan, Saudi Arabia - confirmed
     - Hadeel Al Khamees, Saudi Arabia - confirmed
     - Bassim Uthman, Qatar - confirmed
     - Sharifa Abdool, UAE
     - Tawfeeq Al Saadi, UAE - confirmed
     - Abdulrahman Sabbagh, Saudi Arabia - confirmed
     - Saleh Baeesa, Saudi Arabia - confirmed
     - Suad Al Yamani, Saudi Arabia
     - Mohammed Homoud, Saudi Arabia
     - Marwan Najjar, Lebanon - confirmed
     - Shireen Qureshi, Saudi Arabia
     - Mohammed Kabiraj, Saudi Arabia - confirmed
     - Wassim Nasreddine, Lebanon - confirmed
     - Raidah Al Baradie, Saudi Arabia - confirmed
     - Ibrahim Tabarki, Saudi Arabia - confirmed
     - Eman Bakhsh, Saudi Arabia
     - Ali Al Ghatani, Saudi Arabia

   Members from other CEMA regions were invited to join throughout 2010.

   **Objectives:**
   The yearly plans of the Task Force include:
   - Publishing epilepsy diagnosis and management guidelines.
   - Publishing highlights of abstracts from national, regional and international epilepsy meetings and courses.
   - Publishing highlights of management guidelines from ILAE, American Epilepsy Society and American Academy of Neurology.
   - Publishing epilepsy topic updates from national, regional and international epilepsy meetings and courses.

   **Methodology:**
   - Identify an official regional journal for the education task force of CEMA i.e. Neuroscience. To publish an epilepsy newsletter every three months (include guidelines, highlights, academic calendar and breakthrough epilepsy news and to publish yearly a supplement of epilepsy updates). An official regional journal of activities is planned to contain educational material and papers of local relevance.
• Establish a link to the CEMA website to download all topic updates, diagnosis and management guidelines, Cochrane reviews, etc.

Materials:
Topics to be covered over four years:
1. Classifications of Epilepsy Syndromes and Epileptic Seizures
2. Neonatal Epilepsy
3. Pediatric Epilepsy
4. Adult Epilepsy
5. Diagnosis of Epilepsy
6. Differential Diagnosis of Epilepsy
7. Electroencephalography in Epilepsy
8. Neuroimaging of Epilepsy
9. Lesional Epilepsy
10. Medical Management of Epilepsy
11. Surgical Management of Epilepsy
12. Neuropsychology of Epilepsy
13. Psychiatric and Organic Co-morbidities of epilepsy
14. Status Epilepticus
15. Epilepsy in Women
16. Epilepsy in the Elderly
17. Pharmacoresistant Epilepsy

Budget:
• Expenses of publishing and printing of newsletter and supplement.
• Expenses of secretarial work and editing.
• Expenses for CEMA website update.

2. Research Committee
The Research Committee will be composed of members from different countries of the Region and work under the auspices of the Commission on Eastern Mediterranean Affairs.

The members of this commission come from countries of EMR and must have experience and expertise in the fields of research and epileptology.

The aims of this Committee are:
• To identify research priorities in epilepsy for the EMR
• To establish standards and guidelines for research activities within the EMR
• To support partnerships and exchange information between academics, countries in research activities
• To improve the quality of research in EMR

The Research Committee will:
• Propose research projects individually or federated between different countries.
• Pilot and evaluate the projects.
• Organize training seminars for the young researchers (learn how to conduct an epidemiological survey, how to write a research project, how to write a scientific paper, etc.).
• Organize a forum for research where all researchers of the Region display their work.

• Organize workshops on specific topics of epilepsy.
• Organize and propose training for researchers in accredited laboratories or departments.

Working methodology:
• The Committee will aim to make a preliminary survey in order to determine what has been carried out as research in the Region. This can be done by an exhaustive search in the international literature and by sending a survey completed by members of each chapter in the Region.
• Determine the priority topics to be undertaken in the Region. This will be done by a survey of chapters in the Region.
• Determine in each country of the Region the teams who are actually involved in research studies in the fields of epilepsy.
• All teams whatever their specialty clinical (neurologists, neuropediatricians, pediatricians, neurophysiologists, neurosurgeons, radiologists, etc.) or molecular biology, pharmacologists will be identified.

This data will allow us to determine a priority list of research studies.

To reach their aims, the Committee:
• has mandated to seek funds to finance projects, scientific events and courses.
• will work closely with the Commission for Education.

The seminars, workshops or forum may be included in the conference program to be organized regionally or locally under the auspices of CEMA and the Research Committee.

3. Website Task Force
The CEMA Website will be a source of knowledge, practical information and guidance for patients with epilepsy and the health professionals that take care of them in CEMA countries. The website will have portals for professionals and patients. It will serve to reach out to professionals in all CEMA regions who are taking care of persons with epilepsy by making it easier for them to access practice guidelines, classification schemes, consensus agreements, and learning opportunities.

Patients will have access to a portal that will provide basic information in the Arabic language at a sixth grader level for patients and their families to understand. Facts and myths about epilepsy will be stated. Each country is encouraged to have a not-for-profit epilepsy foundation that will organize events to raise the awareness about epilepsy and help patients find doctors with training in epilepsy. The foundation in each country is encouraged to have a website specific for the needs of patients in their countries. The website for each country will be linked to the CEMA website to make information easily accessible to anyone in CEMA
countries. The CEMA website will have links to IBE and EFA websites. A one-hour lecture on epilepsy will be developed and narrated with slides on the website to be included in the high school curriculum in every CEMA country.

Professionals will have access to recommendations regarding the management and treatment of seizure disorders that are specific to CEMA countries. Selected abstracts related to the field of epilepsy will be featured and updated periodically as needed. Educational materials from multiple sources will be included. Advertisements of upcoming educational events and links to selected regional and international conferences will also be included. The website will feature selected recent publications in epilepsy and offer a platform for presenting interesting cases (of the month) to viewers. In collaboration with other CEMA task forces, the website will be a platform for disseminating position statements regarding epilepsy made by CEMA countries.

Methodology:
CEMA website will be embedded as a Tab in the homepage of the ILAE website and the CEMA logo will be featured.

Members:
Basim Uthman with other members to be confirmed at a later time.

Time needed for this project: two years

4. Interact with governmental groups in establishing resources for comprehensive epilepsy care

The Committee will:
• Establish communication with key governmental figures and lobby for appropriate coverage of medications and options of various treatments and diagnosis for needy patients with epilepsy.
• Demonstrate to key governmental agencies the gap of both epilepsy under-treatment and the economic and social benefits of optimal treatment of epilepsy (Medication, surgery, VNS).
  1. Demonstration project for epilepsy.
  2. Launch campaigns of education about epilepsy in schools, police force and the community.
  3. Make videos to share information about epilepsy.
  4. Epilepsy walk day

Members:
B Uthman and W Nasreddine with other members to be confirmed at another time.

Time needed: 3 years
COMMISSION ON EUROPEAN AFFAIRS (CEA)

List of Members:

Chairman
Meir Bialer
Secretary
Alla Guekht
Treasurer
Eugen Trinka
Past Chair
Michel Baulac
Communication Liaison
Alexis Arzimanoglou
Global Campaign Liaison
Athanasios Covannis
European Advisory Council Chair
Torbjorn Tomson
European Advisory Council Secretary
Reetta Kalviainen
Ex-Officio, Educational Liaison
Helen Cross
Ex-Officio, Basic Sciences Liaison
Asla Pitkanen
Ex-Officio, EC Liaison
Solomon L. Moshé
Ex-Officio, EC Liaison
Emilio Perucca

Aims:

1. Articulate internationally applicable guidelines for diagnosis and treatment of patients with epilepsy in Europe.
   Action: identify liaisons
   a. A Arzimanoglou: Communication; A Covannis: Global Campaign; H Cross: Education & EPNS; A Guekht: EFNS; A Pitkanen: Basic Science; E Trinka: ENS
   b. CEA-EPNS (European Pediatric Neurological Society) joint symposium during the Rhodes-ECE

2. Stimulate and enhance education on the prevention, diagnosis and treatment of epilepsy.
   Action:
   a. Continue having a European Educational Academy (EUREPA) as the CEA academic arm
   b. Continue with the Migrating Courses (MCs) every year, currently reviewing candidates for 2011
   c. Coordinate the European Educational Courses; San Servolo: Basic Science, Pediatrics & Pre-surgical; Elat: Pharmacology & AEDs; Lyon: Stereo EEG
   d. Welcome new regional courses (e.g. Caucasian Summer Schools on Epilepsy)
   e. Encourage new initiatives from Chapters and work toward a coordinated educational agenda

3. Stimulate and enhance basic and clinical research in epilepsy in Europe.
   Action:
   a. Extensive dialog with EU executives aiming to give epilepsy research priority in EU funding
   b. CEA-EU Symposium (Rhodes-ECE, 28 June 2010)
   c. Support scientific conferences with European added value that publish post-conference proceedings (e.g. Status Epilepticus, inflammation in epilepsy)

4. Work with European organizations to catalogue current epilepsy care in Europe and determine needs.
   Action: At the Rhodes-European Chapters’ Convention (26 June 2010) R. Kalvianaen and K. Malmgren reported about the previous CEA report on provision of epilepsy care in Europe authored by K Malmgren et al, Epilepsia, 2003 and discussed the possibility of a second report

5. Prompt and facilitate initiatives that improve standards of comprehensive care (diagnosis, treatment and social care). Reduce the treatment gap throughout Europe.
   Action:
   a. CEA work group to liaise with EMA on EMA’s guidelines on AEDs (Arzimanoglou, Baulac, Bialer, Cross, Kalviainen)
   b. A CEA-CNA-CTS Joint Task Force on regulatory harmonization (first meeting at the Rhodes-ECE)

6. To help ensure that ILAE’s organizational structure is efficiently and effectively dedicated to fulfilling ILAE mission.
   Action: identify liaisons
   a. Continuous update of European Chapters’ Chairs and Secretaries (via Gus Egan, ILAE)
   b. Establish ILAE Chapters in the three remaining European countries (Belarus, Bosnia and Iceland)
   c. Update CEA rules in accordance with the ILAE-EC proposed Constitutional amendment

Commission Activities from July 2009 through August 2010:

1. The Third Eilat International Educational Course on the Pharmacological Treatment of Epilepsy (Eilat, Israel, 8-15 September 2009)
2. The Second Caucasian Summer School on Epilepsy (Bazaleti, Georgia, 4-10 October 2009)
3. The first training course on Stereo EEG (Lyon, France, 9-13 February 2010)
4. The Fourth Baltic Sea Summer School on Epilepsy (BSSSE) (Sandvika, Norway, 13-18 June 2010)
5. Supporting a scientific Symposium on Immunity & Inflammation in Epilepsy (Milan, Italy, 16-18 August 2010)
6. The Ninth European Congress on Epileptology (ECE) (Rhodes, Greece, 27 June -1 July 2010).
7. Utilizing the Rhodes-ECE to organize on 26 June 2010 a very successful European Chapter Convention that strengthened the ties and the two-way communication between the CEA and the current Chairs of the various European ILAE Chapters
8. The 2010 San Servolo Course on Therapy (Venice, Italy 19-29 July 2010)
9. The Fourth Migrating Course (MC) on Epilepsy (Serock, Poland, 15-22 August 2010)

Accomplishments (2009-2010):
1. Writing the CEA Strategic and Action Plans that served as a model for other ILAE-Regional Commissions
2. Establishing the migrating and the Eilat Educational courses as the CEA residential courses
3. Establishing the European Congresses on Epileptology (ECEs) as one of the most successful international scientific epilepsy Congresses that can serve as a model for other Regional Congresses.
4. Start lobbying at EU headquarter (Brussels) via various countries’ representatives to promote epilepsy research in the next FP-7 call
5. Establishing collaboration between the CEA and the ILAE-North American and Therapeutic Strategies Commissions on regulatory harmonization of new antiepileptic drugs approval

Recommendations for Future Work
1. The Fifth Migrating Course (MC) on Epilepsy (Rome, Italy, 29 May – 4 June 2011)
2. The Fourth Eilat International Educational Course on the Pharmacological Treatment of Epilepsy (18-25 September 2011)
3. Organizing a European Chapter Convention during the Rome-IEC (August 2011) and thus, having a yearly dialogue between the CEA and the Chairs of the various ILAE-European Chapters
4. Sponsoring and organizing Regional Epilepsy Educational Conferences in European Regions with unmet need for epilepsy training (e.g., 3rd Caucasian Epilepsy Summer School in Baku, Azerbaijan, October 2011).  
5. Sponsoring scientific Conferences with European–added values (e.g. the 3rd Colloquium on Status Epilepticus, Oxford, UK 7-10 April 2011 and the Comprehensive Epileptology Conference St Petersburg, Russia, 23-25 May 2011)
6. Sponsoring the second EPODES Congress in Brno, Czech Republics, March 2011 (EPODES-European Project on Development of Epilepsy Surgery Program for Central and Eastern Europe)
## List of Members:

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
<td>Manuel Campos (Chile)</td>
</tr>
<tr>
<td>Secretary</td>
<td>Eduardo Barragán (Mexico)</td>
</tr>
<tr>
<td>Treasurer</td>
<td>Patricia Braga (Uruguay)</td>
</tr>
<tr>
<td>LASSE Treasurer</td>
<td>Esper Abrao Cavaleiro (Brazil)</td>
</tr>
<tr>
<td>Vice President and EC Liaison</td>
<td>Marco Medina (Honduras)</td>
</tr>
<tr>
<td>EC Liaison</td>
<td>Samuel Wiebe (Canada)</td>
</tr>
<tr>
<td></td>
<td>Franz Chaves Sell (Costa Rica)</td>
</tr>
<tr>
<td></td>
<td>Beatriz González del Castillo (Venezuela)</td>
</tr>
<tr>
<td></td>
<td>Salvador González-Pal (Cuba)</td>
</tr>
<tr>
<td></td>
<td>Silvia Kochen (Argentina)</td>
</tr>
<tr>
<td></td>
<td>Magda Nunez (Brazil)</td>
</tr>
<tr>
<td>Ex-Officio</td>
<td>Alejandro Scaramelli (Uruguay)</td>
</tr>
</tbody>
</table>

## Sub-commissions and Members:

<table>
<thead>
<tr>
<th>Sub-committee</th>
<th>Chair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latin American Epilepsy Surgery Subcomitee</td>
<td>Mario Alonso (Mexico)</td>
</tr>
<tr>
<td>Secretary</td>
<td>Americo Sakamoto (Brazil)</td>
</tr>
<tr>
<td>Members</td>
<td>Carlos Barzallo (Ecuador)</td>
</tr>
<tr>
<td></td>
<td>Manuel Campos (Chile)</td>
</tr>
<tr>
<td></td>
<td>Carlos DiGiano (Argentina)</td>
</tr>
</tbody>
</table>

## Aims:

1. To provide and promote epilepsy education and research with excellence, quality, efficient and humanistic approach for medical and non-medical professionals in Latin America.
2. To coordinate academic activities among the ILAE Latin America Region Chapters.

## Mission of the Commission:

The Latin American Commission has an objective to improve the diagnosis and treatment of the epilepsies in Latin America, within the frame of our ILAE politics and its Strategic Plan.

## Commission Activities from July 2009 through July 2010:

1. **IV Latin American Summer School on Epilepsy (LASSE) – Escuela de Verano de Epilepsia. February 2010, São Paulo, Brazil**

   LASSE is organized by Prof Esper Abrao Cavaleiro with the support of many Brazilian colleagues (Drs Elza Marcia Yacubian, Americo Sakamoto, Fernando Cendes, etc). LASSE IV occurred 1-10 February 2010 at the Santa Monica Hotel and Convention Center in Guarulhos, São Paulo, Brazil. The main topic was epilepsy and time. During the Congress a special award was presented to Prof Francisco Rubio from Mexico for his work devoted to the development of epilepsy treatment in Mexico and Latin America. LASSE IV had more than 50 young professionals from across Latin America in attendance for the ten-day course. The participants learned through conferences and working in scientific projects. The Congress was supported in part by ILAE (20%) with the rest of the support from the Brazilian government and research agencies. The success of LASSE is also dependant on the generosity of the many faculty (epileptologists) in great relationship with ILAE.

   The previous LASSEs were:
   1. The First Latin American Summer School on Epilepsy: Translating basic knowledge into clinical applications, was held from 4-14, February 2007.
   2. The Second Latin American Summer School on Epilepsy: Increasing knowledge and decreasing treatment gap, was held from 7-17, February 2008.
   3. The Third Latin American Summer School on Epilepsy: Epileptogenesis in the developing brain: Basis for treatment and prevention, 4-14, February 2009.

2. **Latin American Epilepsy Congress (LACE)**

   The LACE is our main regional activity organized every other year in partnership with the International Bureau for Epilepsy (IBE) Commission in Latin America. Our VI LACE was held in Cartagena de Indias, Colombia, 1 – 4 August 2010. Participation in this Congress included more than 700 delegates from across Latin America. The Liga Colombiana Contra la Epilepsia was in charge of the local organization. The local committee was: Orlando Carreño, Jaime Carrizosa, Daniel Nariño and Martin Torres. The Congress had many activities: Plenary conferences, workshops and special educational courses of the Latin American Academy of Epilepsy (ALADE). During the Congress several closed meetings of ILAE and IBE also occured. One of the main activities was a meeting of all Latin American Chapters, where each Chapter gave a report on: epilepsy prevalence, resources (human and equipment), AEDs map, specific problems, etc. This helped to make our Region more cohesive; re-evaluate special needs for each Chapter; and recognize the gap between different countries. The Conferences were recorded and soon we will have the audio and slides on the ILAE website.

3. **Latin American Academy of Epilepsy (ALADE)**

   ALADE depends on our Commission and is its academic arm. The members of the ALADE Executive Committee are: Elza M. Yacubian (Brazil), Patricia Campos (Peru), Silvia Kochen (Argentina), Francisco Rubio Donnadieu (Mexico), Alejandro...
Scaramelli (Uruguay), Esper Cavalheiro (Secretary, Brazil) and Marco T Medina (President, Honduras). They will serve from 2008 to 2011.

ALADE Mission: To provide and promote epilepsy education and research with excellence, quality, efficient and humanistic approach for medical and non-medical professionals in Latin America.

ALADE Vision: To promote and provide epilepsy education and research, aiming to improve the health care of people with epilepsy in the region.

Goal: The goal of ALAE is to promote epilepsy education and research in the Latin American Region in order to improve healthcare of people with epilepsy.

ALADE offered courses at the LACE 2010 and published educational materials. The courses were:
A. Neurobiology
B. EEG
C. Epilepsy prevention
D. Advances in genetics and epilepsy
E. Clinical trials

The first textbook of ALADE was *Semiología de las crisis epilépticas* (Seizures semiology) edited by Silvia Kochen (Argentina) and Elza Marcia Yacubian (Brazil), with support from an academic grant from Abbott.

4. Latin American Epilepsy Surgery Subcommittee
The ILAE Commission on Latin American Affairs with the approval of the ILAE President, Peter Wolf, appointed a new Latin American Epilepsy Surgery Subcommittee. The members of this Subcommittee are: Mario Alonso (Chair, Mexico), Americo Sakamoto (Secretary, Brazil), Carlos Barzallo (Ecuador), Manuel Campos (Chile), Carlos DiGiano (Argentina) and a member from Central America (Guatemala).

The term of this Subcommittee will be the same as the ILAE Commission on Latin American Affairs. The main goals of this Subcommittee are improving the epilepsy surgery gap in Latin America; promoting education and research on epilepsy surgery; and working closely with the Latin American Academy of Epilepsy (ALADE). The main achievement of this Subcommittee has been the accomplishment of the first Fellowship in Epilepsy Surgery. Due to the underdevelopment of epilepsy surgery in many countries in the Region, we obtained ILAE support for one fellowship in surgical treatment of epilepsies (neurosurgeon) with Dr Mario Alonso at the National Neurological and Neurosurgical Institute or Mexico as mentor and coordinator. The first fellowship was for a young colleague from Peru.

5. Relationships with North America Sub-committee
The Latin American Commission worked with the North American Commission, its chair (Jacqueline French, USA) and the Education Task Force of the North American Region. Our main goal was education, through the program Partnering Epilepsy Centers in the Americas (PECA). This program was developed by José Cavazos (USA) with economic support from UCB. It consists of visiting American professors in Latin American epilepsy centers giving support for the development in specific areas of the epilepsies. Many countries were involved: Bolivia, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, Mexico, Paraguay, Peru, Uruguay, etc.

In addition, CAMELICE (Mexican League Against Epilepsy) received 20 fellowships to the best young researchers for attendance at the American Epilepsy Congress in San Antonio, Texas. The persons involved in these activities were Eduardo Barragán (President, CAMELICE) and José Cavazos (AES, local committee). This reflects the possibility and the capacity of collaboration between not only two different Chapters but between Commissions and can help in planning this kind of support in the next Latin American Congress.

6. ILAE Chapters in Latin America:

a. New Chapters: In the Region only two countries do not have ILAE Chapters yet (Bolivia and El Salvador). In the last year, with the participation of Eduardo Barragán and Samuel Wiebe, both countries prepared the formal requirements and are now ready for ILAE evaluation. We hope we will soon have them as formal Chapters in our Commission.

b. Renewal of already established ILAE Chapters: Due to lack of recent and updated information on some Chapters, efforts were made to contact them and to help them to give a new report on their activities. A good example was Nicaragua which is again involved in our ILAE activities. Our tasks on the topic are not finished yet. We would also like to include new physicians in the management of each Chapter, because one of our main duties is identification of new and young colleagues with interest in epilepsy. These people will be the next generation for the development of epilepsy care in Latin America.

7. Regional Journals in Epilepsy:
There are three epilepsy journals in Latin America, where now it is possible to publish local research. The
Neurophysiologic Journal from Brazil, is published in English; Revista Chilena de Epilepsia, is published in Spanish and Revista Uruguaya de Epilepsia has been published since the early 90s, but so far it has only a local distribution.

8. Work together with IBE (International Bureau for Epilepsy):
Our Commission has an excellent relationship with the Latin American IBE Commission (Lilia Nuñez, Chair, Mexico and Tomás Mesa, Secretary, Chile) and the international Vice President (Carlos Acevedo, Chile). We work together in academic and social activities for development of epilepsy in the Region as well as organizing the LAEC. Our next step is to work with the Global Campaign, Epilepsy Out of the Shadows, together with the World Health Organization (WHO). Another goal is to include the epilepsies in the PAHO (Pan-American Health Organization) agenda in the next meeting of the health minister with the PAHO.

Accomplishments (2009-2010):
- IV Latin American Summer School on Epilepsy (LASSE)
- Successful Latin American Epilepsy Congresses in Colombia (2010)
- The Latin American Academy of Epilepsy (ALADE)
- Creation of the Fellowship in Epilepsy Surgery
- Successful Global Campaign Regional activities
- Establishing a collaborative educational project with the ILAE North American Commission

Recommendations for Future Work:
1. Support to LASSE as an important educational activity.
2. Support to the Latin American Congresses, as the main activity in our Region.
3. Continuous support to the Latin American Epilepsy Academy (ALADE) and the Regional educational activities (i.e., Mesoamerica and Caribbean, Andean, etc).
4. Improve basic and epidemiological research and improve epilepsy care in Latin America (i.e., neurocysticercosis project, epilepsy surgery gap and treatment gap).
5. Develop fellowships in our Region for young epileptologists, where main epilepsy centers in the Region will be involved.
**List of Members:**

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
<td>Sheryl Haut (USA)</td>
</tr>
<tr>
<td>Secretary</td>
<td>Sharon Whiting (Canada, President Canadian League Against Epilepsy)</td>
</tr>
<tr>
<td>Treasurer</td>
<td>Lionel Carmant (Canada)</td>
</tr>
<tr>
<td>Members</td>
<td>Amza Ali (Jamaica, Caribbean)</td>
</tr>
<tr>
<td></td>
<td>Nathalie Jetté (Canada)</td>
</tr>
<tr>
<td></td>
<td>Bill Theodore (USA, AES International Affairs Committee)</td>
</tr>
<tr>
<td></td>
<td>Jacqueline French (USA)</td>
</tr>
<tr>
<td>Education Officer</td>
<td>Jaideep Kapur (USA)</td>
</tr>
<tr>
<td>EC Liaison</td>
<td>Samuel Wiebe (ILAE Secretary-General)</td>
</tr>
<tr>
<td>Ex-Offico</td>
<td>Ms Sue Berry, American Epilepsy Society, Executive Director Dr Manuel Campos, Chair, Latin American Commission John Swann (USA) Frances Jensen (USA) Jack Pellock (USA)</td>
</tr>
</tbody>
</table>

**Sub-commissions and Members:**

**Task Force on Education:**

<table>
<thead>
<tr>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jaideep Kapur (Leader)</td>
</tr>
<tr>
<td>Sheryl Haut (USA)</td>
</tr>
<tr>
<td>Jean Gotman (Canada)</td>
</tr>
<tr>
<td>Jose Cavazos (USA)</td>
</tr>
<tr>
<td>Nizam Ahmed (Canada)</td>
</tr>
<tr>
<td>Vivian Suarez (USA)</td>
</tr>
</tbody>
</table>

**Task Force on Regulatory Affairs:**

<table>
<thead>
<tr>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jacqueline French (Co-Chair, USA)</td>
</tr>
<tr>
<td>Meir Bialer (Co-Chair, Israel)</td>
</tr>
<tr>
<td>Steven Schachter (Co-Chair, USA)</td>
</tr>
<tr>
<td>Michel Baulac (France)</td>
</tr>
<tr>
<td>Emilia Bagiella (Statistician, USA)</td>
</tr>
<tr>
<td>Alexi Arzimanoglou (France)</td>
</tr>
<tr>
<td>Eugen Trinka (Austria)</td>
</tr>
<tr>
<td>Scott Mintzer (USA)</td>
</tr>
<tr>
<td>Emilio Perucca (Italy)</td>
</tr>
</tbody>
</table>

**Task Force for Caribbean Development:**

<table>
<thead>
<tr>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amza Ali (Leader, Jamaica)</td>
</tr>
<tr>
<td>Sharon Whiting (Canada, formerly from Jamaica)</td>
</tr>
<tr>
<td>David Clarke (USA formerly from Antigua)</td>
</tr>
<tr>
<td>Jacqueline Bird (St. Lucia)</td>
</tr>
</tbody>
</table>

**Task Force on Stigma:**

<table>
<thead>
<tr>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nathalie Jetté (Leader, Canada)</td>
</tr>
<tr>
<td>Hanneke De Boer (Netherlands)</td>
</tr>
<tr>
<td>Chuck Begley (USA)</td>
</tr>
<tr>
<td>Helen Cross (United Kingdom)</td>
</tr>
<tr>
<td>Ann Jacoby (United Kingdom)</td>
</tr>
<tr>
<td>Joan Austin (USA)</td>
</tr>
<tr>
<td>Samuel Wiebe (Canada)</td>
</tr>
<tr>
<td>Amza Ali (Jamaica)</td>
</tr>
<tr>
<td>Gretchen Birbeck (USA)</td>
</tr>
<tr>
<td>Paula T. Fernandes (Brazil)</td>
</tr>
<tr>
<td>Lionel Carmant (Leader, Canada)</td>
</tr>
<tr>
<td>Marco Medina (Latin American Commission)</td>
</tr>
<tr>
<td>Diogenes Santos-Viloria (Dominican Republic)</td>
</tr>
<tr>
<td>Michel Baldy Moulinier (EUREPA)</td>
</tr>
<tr>
<td>Alex Elie (Haiti)</td>
</tr>
<tr>
<td>Marcel Sévere (Haiti)</td>
</tr>
<tr>
<td>Farah Lubin (USA)</td>
</tr>
<tr>
<td>Jose Ferreira (USA)</td>
</tr>
</tbody>
</table>

**Aims:**

The Commission’s overall goal is to improve the delivery of epilepsy care throughout the Americas and the Caribbean. To achieve its goals, the NAC constituted four Task Forces:

1. Task Force on Education
2. Task force on Regulatory Affairs (Joint Task Force with the Commission on European Affairs and the Commission on Therapeutic Strategies
3. Task Force for Caribbean Development (English speaking Caribbean)
4. Task Force for Hispaniola Development (Haiti and Dominican Republic)

**Mission of the Commission:**

The current North American Regional Commission (NAC) was constituted in 2006, comprising English-speaking North American Chapters of Canada, the United States of America, and the English-speaking Caribbean (represented by Jamaica). The Commission’s overall goal is to improve the delivery of epilepsy care throughout the Americas and the Caribbean. This goal is achieved in collaboration with other Regional Commissions.

**Commission Activities from July 2009 through July 2010:**

All Task Forces established agendas with tangible deliverables and were encouraged to form work groups that included non-Commission individuals as needed to achieve their goals. The agendas of all Task Forces were discussed and approved by the NAC and the budget was assembled and submitted in accordance with these strategies. Task Forces held regular telephone conferences throughout the year, and met face to face once a year at American Epilepsy Society meetings. Progress reports were given to the NAC members at each of their meetings, and discussion of the reports informed further actions. By the nature of its goals and geography, the NAC and its Task Forces worked closely with other ILAE Commissions and Chapters, in particular with the Latin American Commission.
ACCOMPLISHMENTS (2009-2010):

A. Task Force on Education:

The mission of this Task Force has been to promote and improve epilepsy education and care in North and Latin American Regions. The Task Force decided that the best approach to achieve its goals was to develop long-lasting academic and clinical relationships between Latin American (LA), Caribbean, and North American (NA) centers. This could be best accomplished by establishing partnerships. Accordingly, the Task Force developed and supported collaborations between epilepsy centers in NA, LA, and the Caribbean, utilizing three methods implemented in three phases:

- **Phase 1**: Pairing of centers and visiting professorships;
- **Phase 2**: Telemedicine based partnerships to provide continuity; and
- **Phase 3**: Extended mentorships consisting of rotations or visits of specific personnel from LA centers to NA centers. With significant additional support from UCB through an educational grant obtained by José Cavazos, Phase 1 of the program has been successfully run since 2008. A standard application and matching process was developed, and a call for proposals was sent out to American Epilepsy Society members and publicized through the Latin American Commission. Applications were reviewed by the Task Force and were selected based on specific criteria, including merit of the planned curriculum, experience of the applicant, and viability of long-term collaboration.

Completed visits in 2010:

1. Dr Dave Clarke visited Barbados 13 – 16 May 2010, and he is scheduled to attend Jamaica as a Co-Chair of the SNARCCE in Kingston, Jamaica 5-6 November 2010.
2. Dr Angel Hernandez-Mular visited El Salvador on 31 May – 6 June 2010 where he interacted with Dr Claudia Valencia. The visit contributed to help El Salvador become a Chapter of ILAE.
3. Dr David Anschel went to Bolivia 23 August – 2 September 2010. He met with Dr Edil Escobar. This visit contributed to help Bolivia become a Chapter of ILAE.
4. Dr David Marks visited Guatemala 18 – 26 July 2010. He interacted with an epilepsy surgery group led by Dr Itron but also met with other epileptologists and neurologists.
5. This visit of Dr Maria Sam was authorized for 2010 to Paraguay to interact with Dr Marta Cabrera. Due to personal circumstances, Dr Cabrera was authorized to visit the Epilepsy Center of Dr Sam (Bowman Gray Medical School of Wake Forest University) from 26 September – 7 October 2010, with Dr Sam scheduled to visit Paraguay in 2011.
6. We provided funds to Dr Scaremelli in Uruguay to support the visits of a number of visiting faculty members, including Dr Imad Najm, Dr Bulacio and Dr Gonzalez-Martinez (Cleveland Clinic faculty) who went to Montevideo for a symposium.

The partnership program will also be the focus of two activities at the American Epilepsy Society meeting in San Antonio in December 2010. Each of the 18 Partnering Epilepsy Centers in the Americas (PECA) programs will be presented in a poster at the Spanish Symposium, and again at a PECA retreat immediately following the Annual Meeting. The retreat will consist of a series of presentations and discussions regarding the partnership programs. The meeting will be attended by previous visiting professors and faculty from receiving institutions.

B. Task Force on Regulatory Affairs:

The purpose of this Task Force was to convene epilepsy experts from North America, Europe and Canada, under the auspices of the ILAE-North American Commission (NAC), Commission on European Affairs (CEA), and Commission on Therapeutic Strategies (CTS), and determine three or four issues that the group feels to be of highest importance to discuss with US/European regulators, and for which adequate supporting evidence is available. Trial design issues are of critical importance at this time, as epilepsy regulatory trials are becoming increasingly more arduous, and two large-scale phase III trials have recently failed to separate active drug from placebo (brivaracetam, carisbamate). A large number of new AEDs has reduced the motivation of patients to enroll in trials. New trial designs are urgently needed, and these must be accepted by regulatory agencies.

1. A meeting was held in conjunction with the IEC meeting in Rhodes. This meeting allowed us to discuss and solidify our objectives, and also address trial designs that could be acceptable to US/European regulators, and for which adequate supporting evidence is available. Trial design issues are of critical importance at this time, as epilepsy regulatory trials are becoming increasingly more arduous, and two large-scale phase III trials have recently failed to separate active drug from placebo (brivaracetam, carisbamate). A large number of new AEDs has reduced the motivation of patients to enroll in trials. New trial designs are urgently needed, and these must be accepted by regulatory agencies.
   a. A meeting was held in conjunction with the IEC meeting in Rhodes. This meeting allowed us to discuss and solidify our objectives, and also address trial designs that could be acceptable to US/European regulators, and for which adequate supporting evidence is available. Trial design issues are of critical importance at this time, as epilepsy regulatory trials are becoming increasingly more arduous, and two large-scale phase III trials have recently failed to separate active drug from placebo (brivaracetam, carisbamate). A large number of new AEDs has reduced the motivation of patients to enroll in trials. New trial designs are urgently needed, and these must be accepted by regulatory agencies.
2. Dr Russell Katz, FDA Neuropharmacology Division Director, has agreed to a joint meeting with EMA to discuss the issues above. He has co-signed a letter which was sent to EMA inviting them to participate in a joint meeting, to be held in 2011.

C. Task Force for Caribbean Development:

The mission of this Task Force was to improve knowledge of epilepsy in all categories of healthcare workers in Jamaica and in the rest of the English-speaking Caribbean (ESC), and to advance epilepsy care in the ESC. Outlined below is a description of the initiatives, methods, and results:

1. The year started with a visit to Guyana in February by the President of the Jamaican League Against Epilepsy, Dr Amza Ali, sponsored by the ILAE. There Dr Ali met with key health personnel
including the Minister of Health, Dr Leslie Ramsammy. He also lectured to medical students, residents and consultant physicians on the topic of epilepsy in Guyana, unlike most of the rest of the English-speaking Caribbean, appears to have more infection-related epilepsy. The JLAE continues to grow with the addition of 15 members from Guyana. It is hoped that the Guyanese members will become fully involved in the Chapter’s activities especially as it evolves to become a Regional Chapter.

2. In May 2010 Dr Dave Clarke, Visiting Professor to the JLAE and a member of the JLAE, visited St Lucia and Barbados to lecture. He met with several key physicians in these islands and promoted regional integration through the activities of the JLAE and its planned transformation into the Epilepsy Society of the Caribbean (ESC).

3. Quarterly JLAE educational meetings: These events are attended by a wide variety of interested medical and other healthcare workers. Speakers have included local practitioners but the keynote speaker has often been a well-known epileptologist from North America or Europe.

4. In June 2010, Dr Ali visited Barbados to speak on epilepsy and to network further with physicians in Barbados. We believe that the Barbadian physicians will be essential to the success of our regional efforts to advance epilepsy care, particularly in regard to the surgical initiative.

5. July 2010 finally saw the launch of the JLAE website (www.jlae.org). We are very pleased at this development which we know will increase the visibility and activity of the Chapter and help to promote the regionalization of our initiatives.


7. Monthly meetings of the Epilepsy Presurgical Evaluation Group (EPSEG) continue, strengthened by the return of neurosurgeon Professor Renn Holness from a distinguished career in Canada.

8. Regular tele-meetings of the North American Regional Commission continue to take place, attended by Dr Amza Ali, JLAE President.

D. Task Force for Island of Hispaniola Development (Haiti and Dominican Republic):
The mission of the Task Force was threefold: 1) to bring epilepsy care to Haiti, and to provide relief after the earthquake of 2010; 2) to open an Epilepsy Surgery Center in Santo Domingo; and 3) to reduce the incidence of neurocysticercosis and epilepsy related to neurocysticercosis on the Island.

1. The Haiti clinic just finished a critical year, and this could have not been possible without the support of NAC, ILAE and AES. Indeed, following the earthquake, CLIDEP was the only center providing neurological care to the local community. Thanks to the relief funds, we were able to continue to give free care for those who could not afford it and thanks to generous donations from pharmaceutical companies, we provided medication to all patients while pharmacies and local generic companies were not functioning. In fact, we noticed that both compliance and seizure control have since improved.

2. The epilepsy surgery program is in operation and lesionectomies have been performed following video-EEG recordings read by Dr Diogenes Santos Viloria.

3. Neurocysticercosis Project: The project is now completed. Preliminary data suggest that in the endemic region of the Dominican Republic, 25 percent of patients have neurocysticercosis based on blood and imaging tests. The local Committee is in the process of reviewing the final data and we will prepare a publication.

E. North American Regional Epilepsy Congresses:
Starting in 2006 in San Diego, the American Epilepsy Society (AES) decided to designate every other Annual Meeting as the North American Regional Epilepsy Congress. In the year of the North American Regional Congress, the AES meeting advertisement and logos bear the title of North American Regional Epilepsy Congress, and the logos of the Canadian, Jamaican and USA ILAE Chapters. With generous support from the American Epilepsy Society (AES), the NAC has implemented a North American Regional Symposium which takes place every other year during the North American Regional Epilepsy Congress. For the first North American Regional Epilepsy Symposium in 2009, the AES decided to have a highly visible symposium representing the ILAE, which was run by the North American Commission. The topic of the symposium was the new ILAE definition of treatment resistant epilepsy. In 2010, once again, there will be a North American Commission Symposium. This symposium will focus on what different regions of the world can learn from each other.

F. Interaction With the Latin American Regional Commission:
The NAC shares important common links with the LA Commission. Strengthening this collaboration remains a crucial aspect of NAC activities. During this term, the NAC Chair participated in various activities of the LA Commission, including their Regional Congress and LA Chapter Convention. Similarly, the LA Commission Chair was a member of the NAC.
Recommendations for Future Work:

A. Task Force on Education:
The Task Force plans to continue the partnership program, and expand the translation program.

PECA partnership program: We plan to utilize the information learned in the PECA retreat planned for December 2010 in order to enhance and improve the partnership program for 2011. Partnerships for 2011 will be awarded following a call for proposals. We anticipate funding another six to eight partnerships for the 2011 year. There are two previously-funded trips to Cuba that were deferred to 2011:

1. The Camfields are scheduled to visit Cuba. The trip was deferred to January 2011 due to scheduling issues for the Camfields.
2. Dr Karen Parko and Dr David King-Stevens will travel to Cuba to work with a different group than the Camfields. During that trip they will be establishing collaboration with a specialty hospital that is interested in developing an epilepsy surgical program.

Translation: We anticipate significant activity in our translation subcommittee. A number of documents have been identified that will be translated into Spanish to enhance educational opportunities for non-English-speaking epileptologists.

Tele-medicine: We will also be adding a pilot program for tele-medicine which has been an aim of the Education Task Force since its inception. The pilot program will involve Dr Dennis Spencer at Yale University who will set up a link with the Epilepsy Society of the Caribbean for educational purposes. This activity will be in collaboration with the International Affairs Committee of the American Epilepsy Society.

B. Task Force for Caribbean Development:
The future is expected to bring growth of the newly created Epilepsy Society of the Caribbean, which will have its first meeting on 7 November 2010, during the Second Caribbean Congress.

Dr Ali is working with others in an activity of the International Affairs Commission of the AES, chaired by Dr Dennis Spencer, to develop a tele-medicine facility to be physically sited in the Department of Neurosurgery at the University Hospital of the West Indies in Kingston. This initiative has been greatly facilitated by the interest and support of Prof Ivor Crandon, Head of the Department of Neurosurgery at the University of the West Indies. It will link Yale and the EPSEG in Jamaica for regular case conferences toward the development of a mentored epilepsy surgical program in Jamaica for the Caribbean.

C. Task Force for Island of Hispaniola Development (Haiti and Dominican Republic):
The Task Force will continue its bi-annual visit to Haiti. Eventually, Drs Pierre-Louis, Rathke, Bigolow and Spencer have all expressed interest in going when a place for them to stay can be found.

We will prepare with Drs Burneo (Canada) and Garcia (Peru) the next phase of the cysticercosis project which will be either educational or interventional. A meeting to discuss this will occur at the AES meeting in San Antonio.
Topic-Oriented Commissions
COMMISSION ON CLASSIFICATION AND TERMINOLOGY

List of Members:
Chair: Ingrid Scheffer (Australia)
Past-Chair/Secretary: Anne Berg (USA)
Education Officer: Sameer Zuberi (UK)
Information Officer: Pippo Capovilla, (Italy)
Finances: Mary Connolly (Canada)
Ex-Officio: Sam Berkovic (Australia), Doug Nordli (USA)
Executive Committee Liaison: Edouard Hirsch (France)

Sub-commission Members:
Task Forces:
Epilepsy Syndromes: Anne Berg (USA), Stephan Schuele (USA), Ingrid Scheffer (Australia), Lynette Sadleir (New Zealand), Yoshimi Sogawa (USA), Douglas Nordli (USA), Christian Korff (Switzerland), Andrew Lux (UK), Edouard Hirsch (France), Elaine Wirrell (USA), Jeffrey Buchhalter (USA), Laura Tassi (Italy)
Classification of Status Epilepticus: Dan Lowenstein (USA), Ingrid Scheffer (Australia), Shlomo Shinnar (USA), Eugen Trinka (Austria), Hannah Cock (UK), Andrea Rossetti (Switzerland), Dale Hesdorffer (USA)

Aims:
1. Education regarding revisions of terms and organization of the epilepsies
2. Translation of teaching slides/package into other languages
3. Web resource of Controlled Vocabulary, Videos, EEG, MRI for use in diagnosis and phenotyping in epilepsy
4. Diagnostic manual for the six most common electroclinical syndromes (BECTS, CAE, JAE, JME, West, LGS)

Mission:
To develop a scientifically-based approach to the classification of the epilepsies. To improve diagnosis of epilepsy seizures and syndromes globally.

Commission Activities from July 2009 through July 2010:
1. Publication of the new organization of the epilepsies in Epilepsia in April 2010 after an extensive consulting process with the wider epilepsy community online and in a range of educational settings. Since then, lectures in many countries and languages have occurred regarding the new organization and change in concepts regarding the epilepsies
2. Development of a detailed and brief slide-set for education regarding the new organization that was refined by the Commission and Executive. Translation of the new organization into German, Spanish and Japanese
3. Task Force on epilepsy syndromes met and worked on the development of the Diagnostic Manual and development of a controlled vocabulary which is close to completion of the initial phase and will become a web resource
4. Diagnostic Manual developed for the six most common electroclinical syndromes (BECTS, CAE, JAE, JME, West, LGS) as well as for non-syndromic epilepsy

Accomplishments (2009-2010):
The major accomplishment has been the completion and publication of the new organization of the epilepsies, with efforts now aimed at education around the world regarding the new concepts and approaches to epilepsy classification. The second major accomplishment has been the development of the Diagnostic Manual for six common epilepsy syndromes. This will be a web-based resource to aid in diagnosis of epilepsy globally.

Recommendations for Future Work:
1. The above Diagnostic Manual will be extended to include additional epilepsy syndromes with the assistance of Task Force and Commission members and other members of the epilepsy community.
2. Development of a web-based resource of video examples of seizures and EEG recordings to help in education and diagnosis of epilepsy syndromes.
3. Development of a classification of Status Epilepticus
4. Educational material regarding the new organization to be made available globally with translation to other languages

Ingrid E Scheffer
Chair
Commission Members:

Chair: Fernando Cendes (Brazil)
Past Chair: William Davis Gaillard (USA)
Secretary: Matthias Koepp (UK)
Translational Research: Ingmar Blümcke (Germany)
Educational Officer: Prassana Jayakar (USA)
Information Officer: Bruce Hermann (USA)
Treasurer: Friedrich G. Woermann (Germany)
Members: Catherine Chiron (France)
William Theodore (USA)
EC Liaison: Tatsuya Tanaka (Japan)

Subcommissions:

1. Neurophysiology:
   Chair: Prassana Jayakar (USA)
   Past Chair: Demetrios Velis (Holland)
   Secretary: Herman Stefan (Germany)
   Francois Dubeau (Canada)
   Eli Mizrahi (USA)
   Aristeia Galanopoulou (USA)
   Akio Ikeda (Japan)
   Roberto Caraballo (Argentina)
   Paolo Tinuper (Italy)
   Michalis Kontoumanidis (UK)

2. Neuroimaging:
   Chair: Matthias Koepp (UK)
   Past Chair: William Davis Gaillard (USA)
   Secretary: Friedrich G. Woermann (Germany)
   Catherine Chiron (France)
   William Theodore (USA)
   Donald W. Gross (Canada)
   Seung Bong Hong (Korea)
   Dennis Spencer (USA)
   Masako Watanabe (Japan)

3. Neuropathology:
   Chair: Ingmar Blümcke (Germany)
   Secretary: Roberto Spreafico (Italy)
   Eleonora Aronica (Holland)
   Hajime Miyata (Japan)
   Andre Palmini (Brazil)
   Maria Thom (UK)
   Harry Vinters (USA)
   Guenther Sperk (Austria)
  Thomas Jacques (UK)

4. Neuropsychology:
   Chair: Bruce Hermann (USA)
   Secretary: Michael Saling (Australia)
   Mansye Lassonde (Canada)
   Isabelle Jambaqué (France)
   Christoph Helmstaedter (Germany)

5. Focal Cortical Dysplasias:
   Chair: Ingmar Blümcke (Germany)
   Eleonora Aronica (Holland)
   Maria Thom (UK)
   Harry Vinters (USA)
   Andre Palmini (Brazil)
   Roberto Spreafico (Italy)
   Guiliano Avanzini (Italy)
   Scott Baraban (USA)
   Jim Barkovich (USA)
   Giorgio Balltaglia (Italy)
   Albert Becker (Germany)
   Carlos Cepeda (USA)
   Helen Cross (UK)
   Nadia Colombo (Italy)
   Olivier Delalande (Italy)
   Francois Dubeau (Canada)
   John Duncan (UK)
   Renzo Guerrini (Italy)
   Ajay Gupta (USA)
   William Harkness (UK)
   Philippe Kahane (France)
   Giorgio LoRusso (Italy)
   Joseph Loturco (USA)
   Gary Mathern (USA)
   Imad Najm (USA)
   Cigdem Ozkara (Turkey)
   Charles Raybaud (UK)
   Alfonso Represa (France)
   Steven Roper (USA)
   Noriko Salamon (USA)
   Andreas Schulze-Bonhage (Germany)
   Laura Tassi (Italy)
   Annamaria Vezzani (Italy)
   Peter Crino (USA)

Aims:
The major challenge is the proper evaluation and use of technology and other diagnostic methods to improve care of patients with epilepsy when there is such a broad range of available technology and expertise across the globe. At one extreme is the optimal best practices in developed societies. The other is optimal use of limited resources in underdeveloped economies. These issues touch upon education as well as assessments and utilization of diagnostic methods, and emerging diagnostic methods and disciplines.

Mission of the Commission:
To give ILAE all support necessary in order to ensure the optimal use of technology and other diagnostic methods to improve care of patients with epilepsy worldwide.
Commission Activities from July 2009 through July 2010:
The Diagnostic Methods Commission continued to support the planning and implementing of e-learning imaging and EEG courses, as well as other educational activities in different parts of the world, such as activities during 9th European Congress on Epileptology, Rhodes 2010.

The Commission, under the Focal Cortical Displasias (FCD) Task Force worked on a proposal for a new neuropathological classification system for focal cortical dysplasias which was submitted for ILAE approval and is now accepted for publication in Epilepsia. The other Task Forces continue to work in new guidelines towards evidence-based diagnostic applications in different forms of epilepsy.

Accomplishments (2009-2010):
Educational activities; preparation of guidelines which are in draft format; publication of a proposal for a new neuropathological classification system for focal cortical dysplasias; and initiatives for future actions and prospective studies to establish new evidence-based guidelines for diagnostic and outcome measures in surgical treatment of epilepsies.

Recommendations for Future Work:
- Continue and improve the imaging and EEG learning courses
- Promote new e-learning courses together with the Latin American Regional Commission and other Regional Commissions
- Help create and update guidelines
- New and revised classification of hippocampal sclerosis and others
- Seek and establish biomarkers for epilepsy
- Relevance of genetics for diagnostic tests
- Promote workshops during Congresses and courses
- Work with other Commissions on above
- Evaluate use of diagnostic methods through best practices and optimal use in underdeveloped regions

Fernando Cendes
Chair
List of Members:

Chair: Chong Tin Tan
Members: Tallie Z. Baram, Walter van Emde Boas, Maria Canevini, Hassan Hosny, Angelina Kakooza, Ruediger Koehling, David Labiner, Shih Hui Lim, Karupath Radhakrishnan, Marcia Elza Yacubian

Currently, there are two task forces in the Education Commission. The members of the task forces are:

Task Force on Distant Education
Chair: Walter van Emde Boas
Members: Dimitri Velis, Perrine Plouin, Jackie French, Holger Lerche, Catherine Chiron, Kuete Callisté, Magda Nunes, Verena Hézser-V. Wehrs, Priscilla Schisler, Li Kuo Tan, Chong Tin Tan

Task Force on E-Textbook
Editor: Shih Hui Lim
Members: Solomon Moshe, Emilio Perucca, Chong Tin Tan, Li Kuo Tan

Mission and Objectives

The main mission of the Education Commission is to fulfill Aims 1 and 2, and Goal 1 of the Strategic Plan, which are to “Reach out to health professionals in all regions of the world who are taking care of persons with epilepsy by making it easier for them to access learning opportunities”, and “To stimulate and enhance international education and training that concentrates on the prevention, diagnosis, and treatment of epilepsy”. Since taking office, members of the Education Commission or its Task Forces have met face-to-face, in December 2009, March 2010 and March 2011.

The Regional Epilepsy Academies and Commissions

The main mission of the Education Commission is to fulfill Aims 1 and 2, and Goal 1 of the Strategic Plan, which are to “Reach out to health professionals in all regions of the world who are taking care of persons with epilepsy by making it easier for them to access learning opportunities”, and “To stimulate and enhance international education and training that concentrates on the prevention, diagnosis, and treatment of epilepsy”. Since taking office, members of the Education Commission or its Task Forces have met face-to-face, in December 2009, March 2010 and March 2011.

I. Workshops, visiting professorship
1. Stand alone workshops by EUREPA and ASEPA.
2. Workshops during epilepsy congresses.
   For 2010, during the 8th Asian & Oceanian Congress in Melbourne, the 9th European Congress in Rhodes, the 6th Latin America Congress in Cartagena, and the 2nd Eastern Mediterranean Congress in Dubai. For 2011, workshops are also being planned for the IEC in Rome, and during the World Congress of Neurology in Marrakech.
3. Longer duration summer schools.
   For 2010, Stereo EEG (Lyon), Baltic Sea Summer School (Sandvika), Therapeutics (San Servolo), and Epilepsy Over Time (Sao Paolo).
   For 2011, a summer school is being planned for the first time in China.
4. Visiting professorship.
   This is mainly done by the North American Commission, building long lasting academic and clinical relationship between centers in North America, Latin America and the Caribbean.

II. Certification

This is mainly conducted by the ASEPA, as a two-part EEG certification examination. By May 2010, 265 candidates have taken the Part I examination, with a passing rate of 63%; and 120 have taken the Part II examination, with a passing rate of 65%. For 2011, five Part I examination sessions and four Part II examination sessions are being planned. As the examination gains acceptance in various parts of Asia, it is becoming an important link in improving the quality of epilepsy care in the region.

III. Fellowships

The ASEPA has been involved with processing or directly offering fellowships for young Neurologists and Neurosurgeons to undergo 6-12 months of training...
outside their countries since 2003. By the end of 2010, 34 candidates had benefited from this program. All but one candidate has returned to serve in their own communities. The Latin American Commission will be offering similar fellowships in 2011.

IV. Publications
The ASEPA has also been publishing proceedings of the Asian & Oceanian Congresses since 2004 as a supplement of Neurology Asia. The proceedings of the Melbourne AOEC in 2010 are expected to be published in May 2011. The online version of the proceedings can be accessed through the ILAE website.

Distance Learning Courses
The distance learning courses assembled by VIREPA have now transitioned directly to the jurisdiction of ILAE, and the cost has been modified to a more acceptable level. The organization is now being done by the Task Force on Distant Education, chaired by Walter van Emde Boas. The members consist of the course directors, representatives from Africa and Latin America Regional Commissions, and the staff directly involved in running the courses. VIREPA will continue to concentrate on tutored interactive teaching courses, with emphasis on teaching specific skills and increasing the fund of knowledge.

In the 2010 and 2011 academic session, the three courses scheduled were conducted smoothly: EEG (33 participants), CPPT (27 participants) and Neuroimaging (25 participants). For 2011/2012, Pediatric EEG/Neonatology with Perrine Plouin as Director will be added as a new course.

e-Textbook
The need for an epilepsy e-textbook is mainly because there are very few open access materials available on the Internet. On the other hand, there is enormous potential within the ILAE community to create such resources. Shih Hui Lim from Singapore has been appointed as the Editor. This will be a truly web-based book, eventually with potentially unlimited number of chapters. The total number of words in the body text for each chapter should be less than 2,000. The layout is similar to that of “Up to date”. About 50-100 common topics will form the first edition with the timeline of production in December 2011.

Web-based education resources
A trial run recapturing the congress program and workshop was initiated during the Melbourne AOEC, with recapture of voice/power point slides directly by the Education Commission, and the video material produced by Medical Update. The materials will be uploaded to the ILAE website after the proposed ILAE website reorganization. This is to fulfill Goal 1 (1.112) of the Strategic Plan, I.E., to “capture and use educational material generated from the international and regional meetings in different languages”. For 2011, voice/power point slides recapture is also proposed for the Rome IEC. This is envisioned to progressively increase in future years.

With the proposed reorganization of the ILAE website, the Education Commission will also help to enhance the education page, to include the proceedings of the Congresses, VIREPA, recorded presentations, e-textbook and other educational resources. The ultimate aim is to make the ILAE website a popular education resource for epilepsy care practitioners world-wide.

CT Tan
Chair
**COMMISSION ON EPIDEMIOLOGY**

**List of Members:**
- **Co-Chair**: Dale Hesdorffer (USA)
- **Co-Chair**: Ettore Beghi (Italy)
- **Past Chair**: Allen Hauser (USA)
- **Secretary**: Ley Sander (UK)
- **Treasurer**: Charles Newton (Kenya)
- **Educational Officer**: Torbjorn Tomson (Sweden)
- **Information Officer**: Giancarlo Logroscino (Italy)
- **EC Liaison**: Marco Medina
- **Members**: Ding Ding (China), David Thurman (USA)

**Email:** epiebdch@gmail.com

**List of Sub-commissions and Members:**

- **Burden of Mortality**
  - Chair: Giancarlo Logroscino
  - Dale Hesdorffer
  - Allen Hauser
  - Ley Sander
  - Charles Newton
  - Torbjorn Tomson
  - David Thurman
  - As yet unappointed Psychobiology Commission member representative

- **Comorbidity in Epilepsy**
  - Chair: Dale Hesdorffer
  - Ettore Beghi
  - Roberto Tuchman
  - Andres Kanner, member representative from Psychobiology Commission
  - Michael Trimble
  - Paola Torelli
  - Christoph Helmstaedter

- **Reliability and Applicability of Testing of Epilepsy Classifications**
  - Chair: Ettore Beghi
  - Dale Hesdorffer
  - W. Allen Hauser
  - Peter Bergin
  - Jacqueline French
  - Donna Bergen
  - Marco Medina
  - Joyce Cramer
  - Charles Newton

- **Definition of Status Epilepticus for Epidemiological Studies**
  - Chair: Shlomo Shinnar
  - Giancarlo Logroscino
  - Ingrid Scheffer
  - Ding Ding
  - Ed Dudek

**Aims:**
The Commission on Epidemiology's work is focused on providing standards for the conduct of epidemiological research in epilepsy and for describing the epidemiological evidence on the burden of epilepsy and potential preventive measures.

**Mission:**
The Commission on Epidemiology's work is focused upon the burden of epilepsy. The work that stems from this focus includes: the development of standards for the conduct of epidemiological research in epilepsy in order to best study the occurrence and burden of epilepsy; the burden of mortality in epilepsy with a specific focus upon potentially preventable causes of death; the spectrum of comorbidity in epilepsy; development of an epidemiological definition of status epilepticus; and assessment of the reliability of epilepsy classifications.

**Commission Activities from July 2009 through July 2010:**
The Commission began its activities by embarking on a document outlining standards for epidemiologic research in epilepsy. A meeting was held in Rhodes to discuss the document on standards for epidemiological research in epilepsy and to review the work of each Task Force scheduled to begin work in 2009-2010.

The Commission created four Task Forces, their goals and their membership: (1) burden of mortality; (2) comorbidity of epilepsy; (3) reliability and applicability of testing epilepsy classifications; and (3) definition of Status Epilepticus for epidemiological studies.
- The Burden of Mortality Task Force worked with the Commission to complete a manuscript on a combined analysis of case control studies of risk factors for SUDEP.
- In preparation for the work of the Reliability Task Force, thirty case reports were prepared — 15 adults and 15 children — and the preparation of case report forms has begun.
- The Comorbidity Task Force will begin its work in November.
- Members of the Status Epilepticus Task Force will begin work in 2011 with the Commission on Classification’s Task Force on Status Epilepticus, although the work of the Epidemiology Commission Task Force will not begin until 2012.
Accomplishments:
• The manuscript on the combined analysis of SUDEP risk factors was completed and submitted to Epilepsia.
• The manuscript on standards for epidemiologic research in epilepsy was submitted to the Executive Committee for review and feedback was obtained.
• Thirty case reports were prepared for the work of the reliability of Epilepsy Classifications Task Force.
• The Comorbidity Task Force began its work.

Recommendations for Future Work:
It is recommended that the work of the Task Forces continue. We plan to propose a workshop on the standards for epidemiologic studies and surveillance of epilepsy and a symposium on the burden of mortality in epilepsy.

Dale Hesdorffer and Ettore Beghi
Co-Chairs
COMMISSION ON GENETICS OF EPILEPSY

Members:
Chair    Sam Berkovic (Australia)
Past Chair    Ruth Ottman (USA)
Members    Shinichi Hirose (Japan)
Thomas Sander (Germany)
Peter De Jonghe (Belgium)
Nigel Tan (Singapore)
Sanjay Sisodyia (UK)
Dan Lowenstein (USA)
Marcello Kauffman (Argentina)
Alica Goldman (USA)
Carla Marini (Italy)
Michel Baulac, EC Liaison

Aims:
1. Improve genetic literacy of the ILAE members.
2. Develop information sources regarding genetics of epilepsy for the public, taking into account regional sensitivities, cultural factors and possible stigmatization related to epilepsy and genetics.
3. Assist in coordination of international efforts to understand the basis of complex epilepsies that will require large multinational cohorts.

Commission Activities from July 2009 through July 2010
Aim #1: EpiGAD has been maintained and updated. Liaison with GeneTests website established. Plans for specific guidelines in genetics are underway.
Aim #2: No progress as yet.
Aim #3: Engagement of wider epilepsy genetics community in a consortium for complex epilepsies.

Accomplishments (2009-2010):
The major accomplishment has been work for international collaboration in large-scale genetic studies. General good will has been established and it is likely the consortium will be successful.

Importantly, the consortium attracted the attention of the National Institute for Neurologic Disorders and Stroke (NINDS) and we were actively involved in planning and executing a successful meeting in San Diego (September 2010) which led to a White Paper on the subject and a Request for Applications from the National Institutes of Health (NIH) which may fund a “Center without Walls” on Epilepsy Genetics studies for up to US$15 million over five years.

Recommendations for Future Work:
Increased energy needs to be put into educational aspects of the Commission.

The international consortium will take a lot of organization and work

Sam Berkovic
Chair
COMMISSION ON NEUROBIOLOGY

List of Members:
Chair  Jeffrey Noebels (USA)
Co-Chair  Astrid Nehlig (France)
Members  Annamaria Vezzani (Italy)
  Christophe Bernard (France)
  Marco De Curtis (Italy)
  Raman Sankar (USA)
  Rafa Gutierrez (Mexico)
  Terrance O’Brien (Australia)
  Takao Takahashi (Japan)
  Ed Dudek (USA)
  Uwe Heinemann (Germany)
  Matthew Walker (UK)
  S Koh (Kim) (Korea)
  Heidrun Potschka (Germany)
  Feliz Onat (Turkey)
EC Liaison  Edward Bertram III (USA)

Aims:
The Neurobiology Commission, chaired by Astrid Nehlig (Strasbourg) and Jeffrey Noebels (Houston), is actively involved in organizing and implementing international educational projects designed to train young neuroscientists entering the field of basic and translational epilepsy research.

Accomplishments (2009-2010):
In the past year, these included support of the Gordon Conference on Epilepsy held in New Hampshire (August 2010) and the Neurobiology symposia at the European Epilepsy Congress in Rhodes (June 2010).

Recommendations for Future Work:
In the coming year, the Commission is supporting the Fourth Advanced International Course: Bridging Basic with Clinical Epileptology-4, which will be held in San Servolo, Venice 17-29, July 2011. This course brings together young clinical and basic epileptologists for an intensive two-week experience in designing translational research projects.

Planning is also well underway for the upcoming XI Workshop on Neurobiology of Epilepsy (WONOEP) to be held in Grottaferrata, Italy in August 2011. The topic of this workshop, directed by Marco De Curtis (Milan) and the Commission Chairs, is “Finding Novel Mechanisms for Epilepsy Therapy”. The workshop will be structured in panel sessions on the following sub-themes: “Receptors/ion channels and synaptic transmission”; “Anti-inflammatory strategies”; “Metabolic homeostasis”; “Drugs aimed at neurodegenerative targets for epileptogenesis”; and “Strategies for Preclinical Screening and Trial Design”.

Other activities to be supported by the Neurobiology Commission for 2011 include organization of several parallel sessions at the ILAE Congress in Rome, and the Basic Science Workshop in Latin America in 2012.

This year, with the help of the newly-created Task Force on Translational Research, directed by Terence O’Brian (Melbourne), a working group Co-Chaired by Michele Simonato (Ferrara), will begin to develop a comprehensive set of criteria to improve the detailed standards of preclinical analysis for new antiepileptic therapies in experimental models of epilepsy. The need for more stringent levels of preclinical analysis was highlighted by NINDS Director Dr Story Landis at a recent NIH epilepsy workshop on antiepileptogenesis. Dr Landis pointed out that NIH investment in human clinical trials could be accelerated by a higher quality of preclinical evidence. As a result, a multidisciplinary group of experts in epilepsy drug development, animal models, and human clinical AED trials will develop a report entitled “ILAE Recommendations for Preclinical Epilepsy Drug Discovery: Models, Design, Best Practices and Standardization” in the coming year.

During the next year, a project entitled “From Professional Training in Neurobiology to Regional Research Funding”, proposed by the Educational Task Force of this Commission will be launched in partnership with the Educational Commission. The joint project seeks to advance professional training in epilepsy with a focus on new research projects to solve regional epilepsy issues in less advantaged countries. A major goal is to identify resources and mechanisms for research on topics corresponding to specific regional needs. The discussion of this initiative will begin with: 1) identification of specific epilepsy research topics with clinical and social regional relevance, 2) identification of local human resources that will be involved in the project, 3) institutional structures that can host the research activities, 4) an international network that contributes to the development of the initiative, and 5) local and international funding necessary to support the project.

Jeffrey Noebels
Chair
COMMISSION ON NEUROPSYCHOBIOLGY

List of Members:

Co-Chair: Andres Kanner (USA)
Co-Chair and Information Officer: Marco Mula (Italy)
Treasurer: Mike Kerr (UK)
Past Chair: ES Krishnamoorthy (India)
Secretary: Frank Besag (UK)
Educational Officer: Bettina Schmitz (Germany)
EC Liaison: Simon Shorvon (UK)
Members: W Curt LaFrance Jr (USA), Lilia Nunez Orozco (Mexico), Naoto Adachi (Japan)

Sub-commissions:
The Commission on Neuropsychobiology is articulated in a number of Task Forces chaired by Commission members that are working in partnership with other Topic-Oriented and Regional Commissions:
1. Task Force on Education (in conjunction with the Commission on Education)
2. Disabling Epilepsy (in conjunction with IBE, WHO and Global Campaign)
3. Child Neuropsychiatry (in conjunction with the Commission on Pediatrics)
4. Psychoses of Epilepsy
5. Mood and Anxiety Disorders (in conjunction with Regional ILAE Commissions)
6. Intellectual Disabilities in Adults with Epilepsy
7. Behavioral Adverse Effects of Antiepileptic Drugs (in conjunction with the Commission on Therapeutic strategies)
8. Psychiatric Complications of Epilepsy Surgery (in conjunction with the Commission on Surgery)
9. Psychogenic Nonepileptic Seizures (in conjunction with the Commission on Classification and Terminology)

Aims:
The major aim of the Commission is to develop, stimulate and coordinate research and medical education in the field of neuropsychiatry of epilepsy.

The mission is to ensure that health professionals, patients and their care providers have the educational and research resources that are essential in understanding, diagnosing and treating psychiatric manifestations in patients with epilepsy.

Action Plan:
The Strategic Plan of the ILAE Commission on Neuropsychobiology is in accordance with the ILAE Strategic Plan discussed and approved in Budapest, July 2009. The action plan of the Commission was formulated in September 2009 and accepted at the Commission Meeting of ILAE in Paris, October 2009:

• To articulate internationally applicable guidelines for the diagnosis and treatment of persons with epilepsy and psychiatric comorbidity
• To stimulate and enhance international education and training that concentrates on the prevention, diagnosis and treatment of psychiatric comorbidity of epilepsy
• To stimulate and enhance basic and clinical research in behavioral aspects (both psychiatric and cognitive) of epilepsy

Commission Activities from July 2009 through July 2010:
Pending activities from the previous Commission.
The Commission on Neuropsychobiology is finalizing two projects of the previous Commission on Neuropsychiatric Aspects of Epilepsy, namely a document concerning a number of consensus statements on psychiatric comorbidities of epilepsy and a document on the concept of disabling epilepsy and its implications in terms of care and treatment. The consensus statements are almost ready for submission to the Executive Committee for approval while the disabling epilepsy document is under development by the current Task Force on Disabling Epilepsy.

Task Force on Education. A Kanner, Co-Chair, (USA); W Curt LaFrance Jr, Co-Chair, (USA); B Schmitz, Educational Officer, (Germany); M Mula (Italy); A Ettinger (USA). The Commission is developing an educational module on diagnosis and treatment of mood and anxiety disorders in epilepsy in the context of the already developed VIREPA modules. The Commission is in touch with the Sub-commission on Virtual Education.

Task Force on Disabling Epilepsy. ES Krishnamoorthy (India) and L. Nunez Orozco (Mexico). A document on disabling epilepsy is going to be finalized in conjunction with the Task Force on Intellectual Disabilities in Adults and the World Federation of Neurology Task Force on Aphasia and Language Disorders. A closed door meeting is planned for December 2010 in Chennai (participants ES Krishnamoorthy, India; Eckhart Stauffenberg, Norway; Mike Kerr and Daniela Piz, UK; Thomas Balk, UK; and Lilia Nunez, Mexico).

Task Force on Child Neuropsychiatry. F Besag, Chair (UK); R Caplan (USA); D Dunn (USA); A Aldenkamp (The Netherlands); T Deonna (Switzerland); G Gobbi (Italy); and M Sillanpaa (Finland). The Task Force is working on the identification of validated screening instruments for psychopathology in children with epilepsy with special attention to depression, anxiety, ADHD and suicidality. A screening
instrument for hyperactivity, attention problems, and conduct disorder spectrum (CHAOs) has been identified and it is being examined for feasibility in a test sample. Other screening instruments will be identified by Spring 2011 and tested for applicability in a pilot study.

The Task Force has identified a number of key topics deserving special attention and the following review papers are in progress: ADHD; Behavioral outcome of temporal lobectomy in children and teenagers with epilepsy; Evaluation of children with severe mental retardation undergoing epilepsy neurosurgery; Suicide in children and teenagers with epilepsy; Opposite defiance and conduct disorder in children with epilepsy; and Anxiety disorders in children with epilepsy. The Commission is planning to include all these contributions in a special issue of Epilepsia provisionally titled “Controversies in Neurodevelopmental Comorbidities of Children With Epilepsy.”

Task Force on Psychoses. N Adachi, Chair (Japan); K Kanemoto (Japan); P Sachdev (Australia); and B de Toffol (France).

The activity of this Task Force is focused on two main areas: The development of research projects on phenomenology and prognosis of psychoses in patients with epilepsy; and the development of a review paper on diagnosis and treatment of psychoses in patients with epilepsy.

During 2010, three collaborative studies have been launched.

• Effects of seizures on the development of interictal psychosis. To evaluate the effects of seizures on the development of psychosis, we have been evaluating seizure-related conditions of patients who had just developed initial psychosis. Patients with the first-onset interictal psychosis and age/epilepsy type-matched patients without psychosis were identified. Preliminary analyses revealed that interictal psychosis patients had more frequent complex partial seizures at the time of evaluation and a larger number of previous seizures. To our knowledge, no study has shown a number of seizures antedating interictal psychosis. We have found an accumulation effect of seizures on the development of interictal psychosis. Further analysis will be done next year.

• Psychiatric negative symptoms in epilepsy patients. To evaluate psychiatric negative symptoms in epilepsy-psychosis patients with modern neuropsychiatric strategy, this study has adopted four categories of age/education-matched participants, i.e., people with epilepsy and psychosis (interictal psychosis); those with epilepsy and no psychosis (non-psychotic epilepsy); those with psychosis and no epilepsy (schizophrenia); and those with no psychosis and no epilepsy (nonclinical). With comprehensive psychometric procedures, patients with epilepsy, either with or without psychosis, showed a higher negative symptom score than did nonclinical individuals.

• Prognosis of psychoses in epilepsy. Data on the five-year course and prognosis of interictal and postictal psychoses are collected retrospectively to clarify whether psychotic symptoms transform or modify as age advances.

Task Force on Mood and Anxiety Disorders. A Kanner, Chair (USA); M Mula (Italy); B Schmitz (Germany); M Kerr (UK); and D Hesdorffer, Liaison with Commission on Epidemiology (USA).

Translation and validation process of screening instruments for depression in epilepsy with special attention to the Neurological Depression Disorders Inventory for Epilepsy (NDDI-E). A number of versions in different languages have been already produced (Spanish, Italian, Portuguese, Croatian, German) and in some cases the validation process has been also concluded (Spanish, Portuguese). As for the Italian and German versions the validation process is ongoing and it will be concluded by the end of 2011.

In conjunction with the Task Force on Psychiatric Aspects of the American Epilepsy Society, a screening instrument for suicidality in epilepsy has been developed and it is being tested in a small group of patients for feasibility.

Protocols for the use of antidepressant drugs in mood and anxiety disorders in patients with epilepsy have been developed and are ready for submission to the Commission on Therapeutic Strategies and Regional Commissions for approval on feasibility.

Task Force on Intellectual Disabilities in Adults. M Kerr, Chair (UK); M Mula (Italy); A Gil-Nagel (Spain); SM Zuberi (UK); and M Glynn, Liaison with IBE (Ireland).

The specific aim of this Task Force is to get information on the burden, mortality/life expectancy, hospitalization and access to care of people with epilepsy and intellectual disabilities. A web-based survey of IBE members on issues related to learning disabilities has been developed jointly with the IBE and will be launched at the beginning of next year.

The Task Force is working on two main documents: a consensus guidance on recent development in epilepsy care for adults with epilepsy and intellectual disabilities; and a review paper on antiepileptic drugs on this special population of patients with particular attention of efficacy and tolerability.
COMMISSION ON NEUROPSYCHOBIOLOGY (continued)

Task Force on Treatment Strategies. M Mula, Chair (Italy); A Kanner (USA); B Schmitz (Germany); M Trimble (UK); and S Schachter, Liaison with Commission on Therapeutic Strategies (USA).

The Task Force is developing a position paper on the FDA warning regarding the issue of increased suicide risk with antiepileptic drugs. A web-based survey will be launched in 2001 on regional needs in the treatment of psychiatric disorders in patients with epilepsy (availability of psychotropic drugs and access to care).

Task Force on Epilepsy Surgery. A Kanner, Chair (USA); S Wilson (Australia); M Mula (Italy); and B Steinhoff, Liaison with Task Force on Epilepsy Surgery – Commission on Therapeutic Strategies (Germany).

The task force developed and terminated a standardized protocol for diagnosis and treatment of psychiatric disorders in patients undergoing presurgical evaluation. The protocol is under evaluation by the Commission on Therapeutic Strategies for approval and by Regional Commissions for feasibility and special needs for implementation.

Task Force on Psychogenic Non-epileptic Seizures. W Curt LaFrance Jr., Chair (US); M Reuber (UK); L Goldstein (UK); G Baker (UK); R Duncan (UK); and AT Berg, Liaison with Commission on Classification and Terminology (USA).

The task force is working on a comprehensive document on diagnosis of psychogenic non-epileptic seizures. It will represent modern consensus guidance on recent developments regarding neurological and psychological models for diagnosis of PNES.

Andres Kanner and Marco Mula
Co-Chairs
**COMMISSION ON PEDIATRICS**

**List of Members:**
- Co-Chair: Douglas R Nordli, MD (USA)
- Co-Chair: Perrine Plouin, MD (France)
- Past Chair: Helen Cross (UK)
- Information Officer: Heung Dong Kim (Korea)
- Treasurer: Hirokazu Oguni (Japan)
- Secretary: Patrick Van Bogaert (Belgium)
- Education Officer: El Yamani (Saudi Arabia)
- EC Liaison: Solomon L Moshé (USA)
- Members: Kevin Staley (USA), Jaime Corvizosa (Colombia), Donna Craiu (Romania), Roberto Tuchman (USA), J Wilmshurst (South Africa)

**Aims:**
- To raise awareness about the need to support patients as they transition from pediatric to adult specialty medical care.
- To provide written recommendations to ILAE regarding transition to adult healthcare for pediatric patients with epilepsy.

**Mission:**
To establish a program that medical centers can incorporate into existing clinical care to assist patients and families with the transition from pediatric to adult medical care.

**Commission Activities from July 2009 through July 2010:**
- Summarize transition programs for chronic illness.
- Develop a five steps to transition program for pediatric institutions.
- The VI Annual Latin American Conference completed the ILAE transition survey for medical providers.

**Recommendations for Future Work:**
- Fall 2010/Winter 2011 – Pilot 5 step transition program at Childrens Memorial Hospital Epilepsy Center in Chicago.
- Spring/Summer, 2011 – Develop educational series via podcasts for providers about transition to adult care.
- Summer/Fall 2011 – Recruit six to ten sites internationally to pilot transition program.
- Summer 2012 – Evaluate transition program via survey to providers.
- Fall 2012 – Write summary of recommendations for transition to adult healthcare for pediatric patients with epilepsy.

Douglas R Nordli, MD
Co-Chair
COMMISSION ON THERAPEUTIC STRATEGIES

List of Members:

Co-Chair: Steve Schachter (USA)
Co-Chair: Bernhard Steinhoff (Germany)
Information Officer: Guenter Kramer (Switzerland)
Secretary: Carlos Acevedo (Chile)
Treasurer: Patrick Kwan (Hong Kong)
Education Officer: Jack Pellock (USA)
Past Co-Chair: Jackie French (USA)
Past Co-Chair: Gary Mathern (USA)
Members: JoAnne Dahl (Sweden)
Hanneke De Boer (Netherlands)
Jaideep Kapur (USA)
EC Liaison: Emilio Perucca

List of Subcommissions and Members:

Behavoiural Treatments: JoAnne Dahl, Chair
Treatment Gap: Hanneke de Boer (Chair); Gretchen Birbeck; Tarun Dua; Ley Sander
Surgery: Bernhard Steinhoff (Chair); Mario Alonso; Gary Mathern; Taisuke Otzuki; Cigdem Ozkara; Steven Roper; Felix Rosenow; Americo Sacamoto
Drugs: Guenter Kramer (Chair)
Natural Products: Steve Schachter (Chair); Robert Orynych; Nikolaus Sucher
Pharmacogenomics: Patrick Kwan (Chair); Martin Brodie; Tracy Glauser; Michael Johnson; Terence O’Brien; Nigel Tan

Aims:
To complete efforts begun by the previous Commission and to define and pursue opportunities for progress consistent with the ILAE Strategic Plan in several key therapy-related areas: behavioral treatments, drugs, natural products, new strategies of clinical therapeutic studies, pharmacogenomics, surgery and the treatment gap. A couple of substantial projects were completed. Some of the initiated plans and projects are still ongoing and should be accomplished during the coming years.

Mission of the Commission:
To improve the care of patients with epilepsy by facilitating collaboration among clinicians, scientists, and other professionals in fulfillment of the relevant aspects of the ILAE Strategic Plan.

Commission Activities from July 2009 through July 2010:

• The Commission participated in the design and implementation of the 2010 San Servolo Summer School, held in Venice, Italy from 18-29 July. The course was titled “From basic knowledge and clinical trials to rational prescribing in epilepsy”. Commission Co-Chair, Steve Schachter and Michel Baulac were the course directors. Several student projects were directly relevant to ongoing Task Force activities, and it is hoped that students who attended the San Servolo Summer School will become active in their ILAE Chapters and in the work of the Therapeutic Strategies Commission.

• Behavioral Treatments. Under the leadership of JoAnne Dahl, the Behavioral Treatments Task Force is actively exploring opportunities to test the feasibility and preliminary benefits of a behavioral approach to epilepsy treatment in a developing region. In this regard, a potential collaboration with Guangzhou Children’s Hospital in Guangdong, China, to study Acceptance and Commitment Therapy for children with epilepsy is currently under consideration.

• Treatment Gap. Task Force Chair, Hanneke de Boer, is coordinating efforts across ILAE to address the global treatment gap. At a meeting in Heemstede on 25 June, the Task Force re-visited the definition of the treatment gap, discussed regulatory issues concerning the availability of phenobarbital, and then put forward a plan and timetable to make further progress on both topics.

• Surgery. Task Force Chair, Bernhard Steinhoff, convened a meeting on 28 June in Rhodes. The group discussed the need to develop guidelines regarding minimal standards for presurgical workup and surgical treatment of epilepsy. As a first step, they proposed contacting ILAE Chapters and conducting a literature review to benchmark existing standards. In a related action, the Task Force accepted a recommendation by Felix Rosenow to conduct a literature review on the topic of epilepsy surgery in patients with cavernous angiomas with the goal of promulgating management guidelines for this patient population. Lastly, the Task Force agreed with a recommendation by Cigdem Ozkara to serve as a liaison partner for Regional Commissions interested in developing educational programs and visiting professorships in an effort to establish epilepsy surgery programs in regions where they do not currently exist.

• Natural Products. Recognizing the need for reliable information to guide neuroscientists interested in studying natural products as potential treatments for epilepsy, Task Force Chair, Steve Schachter, has
COMMISSION ON THERAPEUTIC STRATEGIES (continued)

guided the development of an extensive and unique Wiki that encompasses the historical, botanical, scientific and medical aspects of plant-derived products that were either discussed by previous neurologists such as Gowers as treatments for epilepsy or other products used for the same purpose over the centuries in Traditional Chinese Medicine.

- **Pharmacogenomics.** The Task Force met in Rhodes on 29 June under the leadership of Patrick Kwan and determined the first priority of work was to develop consensus definitions of drug response phenotypes and secondly, to seek to establish dialogue with regulatory agencies in the application of pharmacogenomic research results, to promote education, and to participate in discussions of related ethical issues.

- **New Strategies of Clinical Therapeutic Studies.** See North American Regional Commission report for recent activities under the leadership of Task Force Chair, Jackie French.

**Accomplishments (2009-2010):**

See Commission activities.

**Recommendations for Future Work:**

- **Behavioral Treatments.** The Task Force will propose and begin implementation of a feasibility study of Acceptance and Commitment Therapy in the treatment of persons with epilepsy in a developing region.

- **Treatment Gap.** The Task Force is planning a workshop to achieve consensus on the definition of the coverage gap, causes of the treatment gap, indicators to measure the coverage gap, methods for integrating these metrics into existing country-specific information systems, and the need for further epidemiological studies.

- **Surgery.** The Surgical Task Force will meet at the AES Annual Meeting in San Antonio to further discuss the cavernous angioma project and to discuss publication plans for the literature review.

- **Natural Products.** The Wiki will be shown to ILAE leadership and, if approved, hosted on the ILAE server and thereby become a widely accessible resource for neuroscientists interested in the potential application of plant-derived products to developing new therapies for epilepsy.

- **Pharmacogenomics.** The Task Force is planning a stakeholders meeting to discuss the pharmacogenomics of epilepsy and to plan for a study to define drug response phenotypes in the context of pharmacogenomics.

- **New Strategies of Clinical Therapeutic Studies.** See North American Regional Commission report for future work as planned by Chair, Jackie French.

Steve Schachter and Bernhard Steinhoff
Co-Chairs
Chapter Reports
BELGIAN LEAGUE AGAINST EPILEPSY

Meetings
11 January 2010 - Brussels
4 October 2010 - Brussels

Summary of Activities in 2009-2010
Activities are carried out by the Flemish League Against Epilepsy and the Walloon League Against Epilepsy.
• The website has been renewed. The homepage was added to the website: Publications and Sponsoring. The section ‘Publications’ gives an overview of the scientific articles published by the members of the General Assembly of the Flemish League Against Epilepsy. The other section explains sponsorship and possibilities to financially support the Flemish League Against Epilepsy.
• The 4th Epilepsy Day was organized in 2009. The event took place in Brussels with 250 participants. This Epilepsy Day was coordinated by Prof Dr Anna Jansen (University Brussels) and Dr Schmedding (University Brussels). The program topics were: Children with Epilepsy Plus; Children with Epilepsy and A Normal Development; Heredity and Pregnancy; Epilepsy in The Family; Practical Advice Concerning Work and Driving License. There was also a separate program for young people from the age of 14 to 25 years.
• The Flemish League Against Epilepsy also published a book Epilepsy – Did You Think You Were Alone? which was presented at the end of Epilepsy Day. The book portrays 12 families who live with epilepsy. Besides the testimonies and pictures of the people, the book also provides practical advice. All the participants of Epilepsy Day received a copy.
• In 2009 the course ‘Electroencephalography and Evoked Potentials’ started. This course was addressed to students in neurology, specialized nurses and laboratory assistants. The course was limited to a maximum of 25 participants and was fully booked. The course consisted of 11 lessons given by neurologists (epilepsy specialists) in Flanders and Brussels.
• The Flemish League Against Epilepsy and the Flemish Contact Groups for people with epilepsy have an intensified cooperation. In 2010 the first joint magazine (Epikrant) was published. The Epikrant is a quarterly magazine with professional and practical information and personal testimonies about epilepsy.
• The Flemish League Against Epilepsy has published three newsletters. This is a summary regarding a specific topic that is sent to all neurologists, pediatric neurologists, neurosurgeons and neuropsychiatrists in Brussels and Flanders. The topics of the newsletters in 2009-2010 were: Epilepsy and the Elderly; Epilepsy; and Heredity and Treatment of Epilepsy with Nevus Vagus Stimulator. In December 2010 there will also be a newsletter about the new legislation regarding the driving license.
• The website has been renewed. The homepage became an interactive page with news items. This published information is also digitally sent to members by means of Epiflashers. Two new sections were added to the website: Publications and Sponsoring. The section ‘Publications’ gives an overview of the scientific articles published by the members of the General Assembly of the Flemish League Against Epilepsy. The other section explains sponsorship and possibilities to financially support the Flemish League Against Epilepsy.
• The French-speaking League Against Epilepsy has published one newsletter.
• In June 2009 and 2010, the “3rd and 4th Workshop on Epilepsy Semiology” was organized by the French-speaking League Against Epilepsy. Topics were Status Epilepticus and Occipital Epilepsies.
• A training course in epilepsy will be posted on the web in mid-December (first course). It was designed by the French-speaking League Against Epilepsy and the Circle of Epilepsy.
• Many public lectures and discussion group meetings have been made in the antennas of the French-speaking League Against Epilepsy.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
Campaign: Out of the Shadows
• The book Epilepsy – Did You Think You Were Alone? was made in collaboration with photographer Patrick De Kuysscher. He also works for a major national newspaper called Het Nieuwsblad. Therefore there was an article published in this newspaper called: ‘40,000 People Have Epilepsy but the Taboo Remains.’
• There was also communication in Klasse (a journal for parents) about five tall stories around epilepsy.
• The National Epilepsy Day, in November 2009 and 2010 at the University Hospital St Luc was a great success for access to information for social service workers and patients. Reports have been published in newspapers (La Dernière Heure, Femme d’aujourd’hui) and an interview was broadcast on the radio Bel RTL.

Educational Activities
The educational activity was the course ‘Electroencephalography and evoked potentials’. The 11 lessons covered the following topics:
• Principles of Neuroanatomy – Dr Van Zandijcke
• Principles of Neurophysiology – Dr Schmedding
• The electroencephalogram (EEG) – Dr Mercelis
• Application of EEG in Neurology and Psychiatry – Dr Hauman
• EEG in Epilepsy and Disturbance of Consciousness – Prof Dr Boon
• EEG in Emergency Admittance and Intensive Care – Prof Dr Vonck
• EEG with Children – Dr Goossens
• Polysomnografie and Inquiry of Sleep – Prof Dr Pevernagie
• Neurophysiology of Evoked Potentials – Prof Dr Boon
• Digital EEG – Prof Dr Lagae
• Practical Demonstration and Individual Exercise of EEG – EP and Sleep Inquiry – Prof Dr Boon

Activities in Conjunction with Local IBE Affiliate
The local IBE Affiliate for Belgium is Mrs Van Daele Claudine. She is the social worker for the East-Flanders district and also member of the Flemish League Against
Epilepsy. Mrs Van Daele was also an important member of the organizing committee for the 4th Epilepsy Day. Mrs Van Daele and Mrs Rosanne Blomme-Dorme (Contact Group of East-Flanders) went to the 12th European Conference on Epilepsy & Society in Porto. They will make a report that will be published in the Epikrant.

Future Plans
The Belgian League Against Epilepsy will organize a professional scientific symposium on 18 June 2010. There will be a reunion for the participants of the eighth course of the ‘Electroencephalography and Evoked Potentials.’

Officer Election Date
11 January 2010

Report Submitted By
Dr Eric Schmedding, Secretary-General

BRAZILIAN LEAGUE AGAINST EPILEPSY

Publications
Journal of Epilepsy and Clinical Neurophysiology

Meeting
Bi-Annual Brazilian Congress of Epilepsy

Summary of Activities in 2009 and 2010
XXXIII Brazilian Congress of Epilepsy

Officer Election Date
5 June 2010

Report Submitted By
Veriano Alexandre Jr, President

CAMEROONIAN LEAGUE AGAINST EPILEPSY

Publications

Meetings
12 March 2010 and 7 November 2010

Summary of Activities in 2009 and 2010
• 17 June 2009: The Constitution Meeting of the Cameroonian League Against Epilepsy was held at the headquarters of the Cameroon Medical Council.

The draft Constitution and Bylaws were amended and adopted by the participants. The members of the Executive Committee were elected by the General Assembly.
• 6 July 2009: The Divisional Officer of the Mfoundi Division (Yaoundé, Cameroon) signed the official Declaration of Creation of the CLAE.
• 1 January 2010: The ILAE Executive Committee decided to provisionally accept Cameroon candidature as an ILAE Chapter.
• 12 March 2010: Admission of new members: Dr Victor Sini (consultant neurologist, Yaoundé Central Hospital), Dr Yacouba Mapoure (consultant neurologist, Douala General Hospital), Dr Fondop (Consultant neurosurgeon, Douala Laquintinie Hospital)
• May 2010: signing of the partnership between the Cameroonian League Against Epilepsy, the French League Against Epilepsy and other French-Speaking leagues. Our cooperation with the Senegalese League Against Epilepsy is very active. Our common objective is the creation of an ILAE Commission for African Affairs.
• 15 July 2010: Death of Dr Daniel Charles Ndo Belinga, 2nd Vice President in charge of national affairs of the Cameroonian League Against Epilepsy.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
We have made several interventions for the sensitization of the population on radio and television by neurologist, psychiatrist and neuropediatrician members of the Cameroon League. The 1st Vice President has initiated collaboration with traditional healers at Batibo (South West region). Between 2000 and 2010, the number of neuroscience specialists working in Cameroon has increased with seven new neurologists, two neuropediatricians, three neurosurgeons, one psychiatrist. Our League is working on a project to reduce the treatment gap in the Mbam Valley (Center region, Cameroon), a region of the highest prevalence in the world. This project is supported by Sanofi Aventis and the Cameroon Ministry of Public Health.

Educational Activities
A train the trainers session was organized in Yaoundé Cameroon from 16 to 19 November 2007 for the francophone session of EUREPA. The 1st Cameroon Epilepsy Day was organized along with it. From 12 to 15 November 2008 the 18th Congress of the Pan African Association of Neurological Sciences was organized in Yaoundé, Cameroon. The main theme was epilepsy. In 2009: two training sessions were organized at Yaoundé for nurses working in two private hospitals.

Activities in Conjunction with Local IBE Affiliate
In Cameroon, an association of epileptic patients exists at Nyamanga, which is affiliated with the IBE. Another one has been created in Batibo and we collaborate
with them, organizing training seminars. During the March 12th meeting it was decided to federate these associations, encouraging them to choose one president who will be their representative in the Executive Committee of the CLAE.

Future Plans
Choose a National Epilepsy Day. Encourage the government to implement the Strategic Plan against epilepsy that was adopted in 2005. Organize a sensitization campaign in elementary and primary schools.

Officer Election Date
Yet to be stated.

Report Submitted By
Dr Callixte Kuate Tegueu, Secretary-General

CHILEAN LEAGUE AGAINST EPILEPSY

Publications
Revista Chilena de Epilepsia

Meetings
XI Jornadas Invernales de Epilepsia

Summary of Activities in 2009 and 2010

WORKSHOPS CONTINUING EDUCATION
Conducted monthly programs.
• December 2008 “Why is the person with seizures despite treatment? Why not using the new antiepileptic drugs?” by Dr Erna A Rauch
• January 2009 “EEG patterns characteristic genetic syndromes” by Dr Loreto Ríos
• March 2009 “Influence psychiatric conditions the outcome of epilepsy surgery?” by Dr Ada Chicharro and “History of the Company” by Dr Perla David
• April 2009 “Gelastic seizures: Surgical case” in Keryma by Dr Acevedo
• May 2009 “Surgery in cortical dysplasias: Clinical experience in the Condes” by Dr Manuel Campos Comment by Dr Roger Gejman, neuropathologist, Catholic University. “Therapeutic approach in malformations of cortical development” by Dr Lilian Cuadra, Institute of Neurosurgery, Asenjo
• July 2009 “Report of the International Epilepsy Congress held in Budapest” by Dr Perla David. Report included participation in Assembly election; ILAE new directory; obtaining access to key online magazine; and update the Company’s new directory on the ILAE website. “Quality of life in children with epilepsy compared with healthy children” by Dr Lucia Andrade
• August 2009 “Epilepsy and depression” by Dr Juan Salinas
• September 2009 “Celebration of Latin-American Day Epilepsy” By Dr Marcelo Deviat and “Epi-genetics in epilepsy” by Dr Andrés Barrios
• October 2009 “Update in Dravet syndrome. Presentation of two cases and experience of a parent” Dr Consuelo Gayoso (President of APADENE)

EPILEPSY IN TALKS FOR PHYSICIANS
This is the fourth year that this continuing education activity has taken place at the headquarters of the Society of Chile Epileptology every Wednesday starting 14 October and ending on 16 December. The Directors were Dr Perla David and Dr Juan Salinas. They are currently sponsored by the University of Chile and in the process of academic accreditation as a continuing education course. The program was developed by neurologists and psychiatrists belonging to our Society. The topics discussed contribute to improving general practitioners and scholars of neurology. Evaluation as in previous years has been positive and we plan to continue with it, renewing the issues and changing schedules to provide assistance.

IX WINTER DAYS OF EPILEPSY 2009
The IX Winter Days Epilepsy was held 12 & 13 June 2009 at the Hotel Neruda. Dr Nelly Chiofalo Santini was commemorated in the 100 years of the International League Against Epilepsy and the 10-year Epileptology Society of Chile. International guests were Prof Dr Alberto Lazarowski (Argentina) and Prof Dr Alexis Arzimanoglou (France), in addition to the participation of our national speakers, most of them also members of our Society. Specialists and scholars presented 30 research papers in the poster section. The event was attended by 153 people, mostly doctors.

JOURNAL OF EPILEPSY
Revista Chilena de Epilepsia, the official publication of the Society. Dr Perla David, editor. This year marks the 10th volume of this journal. It presents original works, case reports, review papers and updates. It is currently in the application process and has achieved SciElo sponsorship for the annual increase in numbers was required. The journal is found at www.revistachilenadeepilepsia.cl. Dr Ledia Troncoso joined the editorial board, which has been a great contribution to this publication.

WEB PAGE
Our website, www.epilepsiadechile.com, is available to members and the general public. You can find information about the Society and issues related to epilepsy, in the following sections:
1) Directory
2) Partners
3) Winter Conference Epilepsy
4) References (bibliographical references on epilepsy)
5) Publications (Revista Chilena de Epilepsia and Standards)
6) Photo gallery
7) For medical Tribune
8) The patients Tribune
9) Links to ILAE, IBE, WHO and MINSAL
10) Latin American Epilepsy Day

The website has played an important role for college students who are the most frequent users asking for references and information, in addition there are various contributions from patients through their relatives.

LATIN AMERICAN DAY CELEBRATION OF EPILEPSY
On 9 September Epilepsy Day was celebrated in Latin America. One of the events is organized by the Chilean League Against Epilepsy, which was attended by Dr. Perla David, President of the Epileptology Society of Chile, along with ministry officials and hosts. At our meeting on 12 September, Dr. Perla David held a commemoration of Latin American Epilepsy Day.

ACTIVITIES FOR 2010
The Winter X Epilepsy Conference is scheduled for 11 and 12 June 2010. The Conference is entitled: “Epilepsy: Diagnosis, surgical treatment and neuroplasticity.” The Organizing Committee invites you to engage stakeholders through original works that can be sent to the website Epileptology Society of Chile.

CHINA ASSOCIATION AGAINST EPILEPSY

Publications
Green Book of Prevention and Control of Epilepsy in China, The Consensus on the application of antiepileptic drugs before and after epilepsy surgery (Pilot version)

Meetings
Congress of CAAE members’ representatives (Election of the 2nd Council)

Summary of Activities in 2009 and 2010
1. Celebrating the 3rd and 4th International Epilepsy Caring Day (IECD) 28 June, including public education activities in most provinces in China, voluntary diagnosis/treatment, multi-mass media publicities, etc.
2. The 3rd Beijing International Epilepsy Forum (BIEF) was held in Beijing in November 2009; and the 2nd National Conference of EEG and Neurophysiology was held in Nanchang, Jiangxi Province in May 2010.
3. Prof Shichuo Li was re-elected as President of CAAE.
4. The ASEPA-ASNA EEG Certification Examination (Part I & II) was conducted. Results are generally satisfactory.
5. The number of the newly established provincial epilepsy associations increased to ten.
6. 2010-2011 Biennial WHO Collaborative projects started in Tibetan population in Sichuan Province.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
1. Follow-up study for the GCAE Demonstration Project (2001-04) has been completed.
2. Continuing implementation of the Project of “Epilepsy Prevention and Control Management in Rural China” in 15 provinces, covering more than 40 million people and 30,000 people with epilepsy (PWE) are under free treatment with phenobarbital.
3. The funding from the central government to this project will be doubled next year and another three provinces will join in this project (total of 18 provinces by 2011).

Educational Activities
1. Six training courses in collaboration with ASEPA were conducted in China in 2009-10.
2. Training courses of the “Clinical guidelines for epilepsy diagnosis and treatment” were conducted in nine more cities (total of 29 cities).
3. National EEG training material is underwritten.

Activities in Conjunction with Local IBE Affiliate
See above (IECD activities).
A formal branch of the CAAE concerning the IBE function has been prepared to apply for approval by MOH and Ministry of Civil Affairs.

Future Plans
Consenso in epileptic syndromes in Chile course, Chilean Bureau, ILAE-Chapter; Resistant Epilepsy group in Chile from Chilean ILAE Chapter; Multi-centric Study of Epilepsy

Officer Election Date
December 2010

Report Submitted By
Dr Perla David, President
Future Plans
1. 4th Beijing International Epilepsy Forum (BIEF) is planned for 22 – 25 September 2011. The role of traditional Chinese medicine in epilepsy treatment and psychosis with epilepsy will be two “sub-forums” in the 4th BIEF.
2. 2nd ASEPA-ASNA EEG Certification Examination will be conducted in April 2011.
3. ILAE Summer Course will be held in Sichuan Province in July or August 2011.
4. Symposium on development and construction of local epilepsy organizations will be held in 2011.
5. Three ASEPA training courses will be held in 2011.

Officer Election Date
November 2013

Report Submitted By
Shichuo Li, President

GREEK LEAGUE AGAINST EPILEPSY

Meetings
• 5th Epilepsy Panhellenic Congress, Crete – Chania, 4-6 November 2009
• National Greek Seminar Against Epilepsy, Rhodes, 26 June 2010

Summary of Activities in 2009 and 2010
5th Epilepsy Panhellenic Congress: 350 participants, seven round tables, one video session, four satellite symposia, one workshop on photosensitivity, two lectures, 32 abstracts, 26 International Invited Speakers, 40 Greek Invited Speakers. Summary of Activities in National Greek Seminar against Epilepsy: 96 participants, three round tables, one satellite lecture, one session with oral presentations, six abstracts, 18 Invited Speakers

Future Plans
• Five Educational Seminars are planned. One will take place in Volos from 19 to 21 November 2010. Two are planned during 2011. One is already confirmed and will take place in Thessaloniki from 24-26 June 2011. Two during 2012 Panhellenic Epilepsy Congresses.
• Financial Support to Neurology Interns by participating in the aforementioned events free of charge
• Scholarships of Young Investigators
• Improvement of the GR LAE website
• Research Programs

HUNGARIAN EPILEPSY LEAGUE (HEL)

Publications

Meetings
In 2009: Meeting of HEL, as a Section of the Hungarian Clinical Neurophysiologic Society Conference, Kalocsa.
In 2010: Meeting of HEL, Kecskemet.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
In 2009, the 28th International Epilepsy Congress was held in Budapest. It was a great challenge for the HEL to help organize a successful and memorable Centenarian Congress, in association with the ILAE. In 2010, we published the new detailed form of the Epilepsy Protocol (Guideline of Epilepsy Care). The protocol contains the diagnostic, therapeutic, rehabilitation and caregiving recommendations, and defines the rules of personal and institutional conditions of epilepsy care.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
In 2009, the 28th International Epilepsy Congress was held in Budapest. It was a great challenge for the HEL to help organize a successful and memorable Centenarian Congress, in association with the ILAE. In 2010, we published the new detailed form of the Epilepsy Protocol (Guideline of Epilepsy Care). The protocol contains the diagnostic, therapeutic, rehabilitation and caregiving recommendations, and defines the rules of personal and institutional conditions of epilepsy care.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
Patronizing and supporting the Valentine Epilepsy Days every year on 14 February. Publications for patients and their families about epilepsy.
Educational Activities
Regular educational courses and workshops on epilepsy in Győr (yearly). Teaching courses, about modern diagnostic and therapeutic methods in epilepsy, Budapest. The HEL announced a competition for the Donath Prize. The aim of the award is to inspire the scientific and educational activities of the young physicians, students, and medical specialists in the field of epilepsy.

Activities in Conjunction with Local IBE Affiliate
The Association for the Future of People with Epilepsy in Hungary has been a member of the IBE since 2007. Continue helping the activity of the organization having an umbrella function, coordinating the local societies, and patronizing the Valentine Epilepsy Days.

Future Plans
To continue the regular educational courses. To elaborate the new standards of quality control in epilepsy care in Hungary.

Officer Election Date
2011

Report Submitted By
J Jerney, President and Z Szupera, Secretary-General

ISRAELI LEAGUE AGAINST EPILEPSY

Meetings
As follows

Summary of Activities in 2009 and 2010
Annual Meetings:
• January 2009. Guest speaker: Gregory L Holmes
• January 2010. Guest speaker: Simon Shorvon (Number of participants – 213)

Additional Meetings:
• Loss of consciousness: Epileptic vs. cardiac (joint venture with the Israeli Cardiology Association – 300 participants)
• EEG workshops (4 hours with 50 participants)
• X 2 (May 2009 and February 2010)
• New Development in Epilepsy. 10 May 2010 (five guest speakers: S Berkovic, E Andermann, F Andermann, R Rikonen, M Sperling)

Activities in Conjunction with Local IBE Affiliate
Consultation on local IBE web (scientific part, Q & A)

Officer Election Date
20 January 2011

Report Submitted By
Uri Kramer, President

JAMAICAN LEAGUE AGAINST EPILEPSY

Summary of Activities in 2009 and 2010
2009
• This was a busy year for the JLAE following the success of the First North American Regional Caribbean Congress on Epilepsy in May 2008. Regular teleconferences of the North American Commission took place, attended by Dr Ali, representing the JLAE and the affiliated Caribbean physicians.
• In February 2009 the Epilepsy Pre-surgical Evaluation Group (EPSEG) at the Mona Campus of the University Hospital of the West Indies was formally launched by the Vice-Chancellor of the University, Prof E Nigel Harris, who commended the group on making a major step forward in dealing with a disorder much in need of advancement in care in the Caribbean. Since then we have had regular meetings of the EPSEG and although surgeries have not yet commenced, important management decisions regarding medical management and further investigations are regularly achieved, as well as excellent academic discussions.
• In April 2009, the JLAE was proud to host a week-long visit by Professors Dennis and Susan Spencer. During this busy week they met with the JLAE as well as paid courtesy calls on the Dean of the Faculty of Medical Sciences, Professor A McDonald, the Principal, Professor G Shirley and the Vice-Chancellor of the University. They also formalized links with the Head of the Department of Neurosurgery Professor Ivor Crandon. Tours of the hospital then took place as well as teachings with residents. A CPC activity with Susan Spencer was well attended. Sadly, Professor Susan Spencer passed away soon after and remains much missed by those whom she met here in Jamaica.
• In late April, Amza Ali, President of the JLAE, was invited to speak at the Annual Nathan Rifkinson Neurosurgical Symposium in Puerto Rico. This allowed him the opportunity to discuss the plans for a Regional Epilepsy Society of the Caribbean (ESC). There was much interest in this.
• In July 2009 Dave Clarke, Visiting Professor to the JLAE and Amza Ali, made a visit to Antigua where lectures and clinical contact occurred. This was well received and plans are evolving to have them return regularly for clinical contact and an ongoing lecture schedule.
• Dave Clarke was also able to secure grant funding for the Secretary of the JLAE, Dr Roxanne Melbourne-Chambers, to proceed with a study on the use of a pediatric epilepsy questionnaire in Jamaica. She will present the data at the Second North American Regional Caribbean Congress on Epilepsy in 2010.
• In October 2009 Dr Ali also spent a week in Trinidad lecturing and teaching on epilepsy and informing the local medical community of the plans for an inclusive Regional Chapter, i.e., the Epilepsy Society of Caribbean.
• In November 2009, Dr Ali and Dr Clarke attended the Caribbean Association of Neurosurgeons Annual Meeting in Puerto Rico where Dr Clarke gave a well
received presentation on his work in epilepsy surgery. Later that month Drs Ali, Peter Johnson (radiologist) and Tammy Haynes-Robinson (neuropsychologist) visited Professor Dennis Spencer at Yale University in New Haven. There we put together our own protocol for WADA testing, based on the Yale method of as well as built relationships with the neuropsychology, neurosurgery and neurology groups there as we continue our efforts to develop an epilepsy surgical program in Jamaica for the Caribbean.

2010

• The year 2010 started with a visit to Guyana in February by the President, Amza Ali, sponsored by the ILAE. There Dr Ali met with key health personnel including the Minister of Health, Dr Leslie Rams Sammy. He also lectured to medical students, residents and consultant physicians on the topic of epilepsy. The visit was quite revealing as epilepsy in Guyana, unlike most of the rest of the English-speaking Caribbean appears to have more infection-related epilepsy. The JLAE continues to grow with the addition of 15 members from Guyana. We hope that the Guyanese members will become fully involved in our Chapter’s activities especially as it evolves to become a Regional Chapter.

• Monthly meetings of the Epilepsy Pre-surgical Evaluation Group (EPSEG) continue, strengthened by the return of neurosurgeon Professor Renn Holness from a distinguished career in Canada.

• Regular tele-meetings of the North American Regional Commission continue to take place, attended by Dr Amza Ali, JLAE President. A face to face Commission meeting took place at the American Academy of Neurology Annual Meeting in Toronto in April 2010, also attended by Dr Ali.

• In May 2010 Dr Dave Clarke, Visiting Professor to the JLAE and a member of the JLAE, visited St Lucia and Barbados to lecture. He met with several key physicians in these islands and promoted regional integration through the activities of the JLAE and its planned transformation into the Epilepsy Society of the Caribbean (ESC).

• A paper on Seizures in Sickle Cell Disease in Jamaica authored by JLAE members Susanna and Amza Ali was accepted for publication in the British Journal of Haematology. The Alis also recently submitted a grant application to expand work in this area.

• Dr Ali is working with others in an activity of the International Affairs Commission of the AES, chaired by Professor Dennis Spencer, to develop a telemedicine facility to be physically sited in the Department of Neurosurgery at the University Hospital of the West Indies in Kingston. This initiative has been greatly facilitated by the interest and support of Professor Ivor Crandon, Head of the Department of Neurosurgery at the University of the West Indies. It will link Yale and the EPSEG in Jamaica for regular case conferences, towards the development of a mentored epilepsy surgical program in Jamaica for the Caribbean.

• In this regard we were also very happy that the AES and ILAE have made it possible for Puerto Rico to join the planned ESC as a full member. Their presence will undoubtedly strengthen the Regional Chapter.

• In June 2010 Dr Ali visited Barbados to speak on epilepsy and to network further with physicians in Barbados. We believe that the Barbadian physicians will be essential to the success of our regional efforts to advance epilepsy care, particularly in regard to the surgical initiative.

• July 2010 finally saw the launch of the JLAE website (www.jlae.org). We are very pleased at this development which we know will increase the visibility and activity of the Chapter and help to promote the regionalization of our initiatives.

• In September 2010 Dr Ali was invited to lecture and teach residents in Trinidad where he again continued his efforts for regional integration for advancing epilepsy care. Drs Ali and Clarke also went to Antigua in October for lectures and clinical contact, evolving out of the success of last year’s visit by the two physicians. Twelve patients who had difficult management problems were seen by us. A wide spectrum of cases was seen, including sickle cell disease and epilepsy, malformations of cortical development and non-epileptic seizures. It can be said at this point there is a need to raise awareness about the plans to develop a Caribbean Regional Chapter of the ILAE as the ESC. In this regard Dr Clarke must be commended for his efforts to bring several of the Windward and Leeward islands of the Eastern Caribbean on board.

• Finally, the JLAE will host the Second North American Regional Caribbean Congress on Epilepsy (SNARCCE) to be held in Kingston, Jamaica 5-7 November. Apart from the academic and social activities, we are working to develop a truly representative Constitution that will ensure successful inter-island collaborations. This is part of the full application process for Chapter membership in ILAE, which in addition to the Constitution, includes Bylaws, proof of incorporation, and description of epilepsy services in the area. The full application will undoubtedly be made easier as we expand telemedicine services across the Caribbean and so function as one cohesive Society. These constitutional articles will be discussed on 7 November at a meeting of Caribbean physicians and the ILAE Executive, including its President, Professor Solomon Moshé, who will be a keynote speaker at the Congress.

JAPAN EPILEPSY SOCIETY (JES)

Publications
Tenkan Kenkyu (published three times a year), Epilepsy & Seizure (published once a year)

Summary of Activities in 2009 and 2010
The year 2009 was a year of remarkable developments both domestically and internationally compared to past years.
CHAPTERS LIST AND REPORTS

1. The 28th International Epilepsy Congress was held in Budapest from 28 June to 2 July 2009. A total of 37 papers (four oral presentations and 33 posters) were presented from JES. During the Congress, the General Assembly of the ILAE was held and the new Executive Committee for the next four years was installed. Tatsuya Tanaka, then President of JES, assumed the office of First Vice President.

2. The year 2009 also marked the change of office for the JES Board of Directors. The new Board was installed at the General Assembly held on 21 October 2009. After the out-going President Tatsuya Tanaka and the other directors departed office, the newly elected President Sunao Kaneko and the new Board of Directors were inaugurated. Sunao Kaneko, the new President, also served as a member of the Commission of Asian and Oceania Affairs for epilepsy problems.

3. The membership of JES has continued to increase, with an additional 175 members joining the Society since 1 December 2008. Especially, there is a constant increase in pediatricians, neurologists and neurosurgeons.

4. Thirty-five members passed the certification examination for “clinical specialist for epilepsy” in 2009. Including these newly certified, a total of 353 JES-certified clinical specialists for epilepsy are now practicing in Japan.

5. The 43rd Congress of JES was held in Hirosaki on 22-23 October 2009 under Chair, Sunao Kaneko. Over 800 participants actively took part in discussions. The 2nd Korean Epilepsy Society – JES Joint Symposium — was also held during the Congress. It was decided that the 3rd symposium will be held in Seoul in June 2010.

6. As a post-Congress program, the International Symposium on Pharmacogenomics in Epilepsy was held in Hirosaki. World renowned researchers in epilepsy presented their latest findings in 13 oral presentations and 10 posters.

7. JES has started the JES Sponsored Award. Starting March 2010, ten young JES members will be dispatched to France and other countries.

8. Two young researchers in the Asian and Oceania Regions were supported by the JES Scholarship to receive training in Japan in 2009.

Report Submitted By
Masako Watanabe, Secretary-General

KOREAN CHAPTER/SANG-DOE YI

Summary of Activities in 2009 and 2010
The 2010 Korean Pediatric Epilepsy Preceptorship
The 2010 Korean Epilepsy Society International Education Fellowship

Educational Activities
The 2010 Korean Pediatric Epilepsy Preceptorship: The South Korean Epilepsy Society has established a comprehensive three-day course of an annual Pediatric Epilepsy Preceptorship program for Asian Pediatric Epilepsy Fellows and Junior faculties. This program, endorsed by the Pediatric Commission of the ILAE, co-branded by the Asian Epilepsy Academy of the ILAE, is held at Severance Hospital, Yonsei University, Seoul, Korea from 11 to 13 November 2010. This program overviews the diagnosis, classification and management of seizures, current advances in pediatric epilepsy including new diagnostic methods, treatment options, and underlying pathophysiology.

The 2010 Korean Epilepsy Society International Education Fellowship: The Korean Epilepsy Society has established an annual fellowship program for promotion of epileptology in the Asian and Oceania countries. Two young neurologists in adult and pediatric neurology were invited to attend the Korean Epilepsy Society Annual Meeting and to make a short visit for two months to a selected hospital epilepsy center (in this year, Severance Hospital, Yonsei University, Seoul) in Korea.

Officer Election Date
22 October 2007

Report Submitted By
Heung Dong Kim

SOCIETY OF EPILEPTOLOGISTS OF LITHUANIA

Publications

Meetings
“Safe and effective treatment of epilepsy” in March 2008, Kaunas; “Development of epileptology: from the beginning to the latest achievements” dedicated to the ILAE Centenary celebration in January 2010, Kaunas.

Summary of Activities in 2009 and 2010
• Organization of annual conferences with participation of experts in the field from other countries.
• Organization of the special event devoted to the ILAE Centenary celebration and the Conference “Development of epileptology: from the beginning to the latest achievements”, reviewing international and Lithuanian history of epileptology, current problems and perspectives.
• Co-organization of the 2nd Migrating Course on Epilepsy (with ILAE-CEA and EUREPA) on 1-8 June, 2008 in Trakai with 35 participants from 15 countries and 23 speakers.
• Two special sessions on epilepsy during the 6th Baltic Congress of Neurology in Vilnius, 14-16 May 2009 with participation of numerous outstanding speakers.
• Practical teaching course “EEG in epilepsy” with the participation of international experts on 13 May, 2009 in Vilnius.
• Session and instructional course on epilepsy during 21st Annual Meeting of European Academy of Childhood Disability on 3-6 June 2009 in Vilnius.
• Conference “Rare syndromes and orphan drugs in epilepsy” co-organized with Lithuanian Child Neurology Society in December 2009.
• Regular communication with the health authorities regarding availability of antiepileptic drugs and rehabilitation of patients with epilepsy.
• Participation in the working group to create new law of driving for people with epilepsy according to the directives of EU Commission (valid from 29 September 2010).
• Updated guidelines on management of epilepsy patients in Lithuania are in process (started 2010).

Summary of Activities in Relation to Global Campaign in 2009 and 2010
Promotion of epilepsy-related problems by inviting mass media to the organized events and publishing in press. Activities related to the new law for driving and rehabilitation program.

Educational Activities
• Annual Conferences of Society and co-organized Conferences.
• 2nd Migrating Course on Epilepsy, practical teaching course on EEG.
• Postgraduate courses on epilepsy for neurologists, pediatric neurologists and nurses at university hospitals.

Activities in Conjunction with Local IBE Affiliate
Priority – establishment and reorganization of rehabilitation in epilepsy. Special working group has been organized with participation of specialists (neurologists, rehabilitologist), patient organization LESIA (associate IBE member) and representatives of the Ministries of Health and of Social Affairs. Further development of cooperation with Bethel Epilepsy Center in Germany, visits of representatives of LESIA and representatives of German ILAE Chapter to Lithuania. Inter-university collaboration between Kaunas University of Medicine and Bielefeld University was established, research work on rehabilitation of patients with epilepsy was performed followed by defense of doctoral thesis. Grant provided for participation at IBE Congress (epilepsy nurse). Society grant-supporting research in rehabilitation in epilepsy.

Future Plans
Summary of Activities in Relation to Global Campaign in 2009 and 2010

Raising public awareness of epilepsy as a disease and the treatment modalities available in both adult and pediatric via newsprint and audiovisual media.

Educational Activities

A series of continuous medical educational programs was carried out by Prof Dato Dr Raymond Azman Ali


2. “Diagnosing epileptic seizures: fits or faints?” presented to the clinical students at the medical faculty of Universitas Syiah Kuala, Banda Aceh, Indonesia, 13 April 2009.


5. “Management of Epilepsy” at the continuing medical education session, Department of Neurology, Kuala Lumpur Hospital, 15 June 2009.


7. “Overview of Epilepsy” at the Monthly CME of the Sultanah Nur Zahirah Hospital, Kuala Terengganu, Malaysia, 30 July 2009.

8. “Status Epileptics” at the Neurology Update of the Neurology Unit of the Sultanah Nur Zahirah Hospital, Kuala Terengganu, Malaysia, 30 July 2009.

9. “Adult onset epilepsy: seizure semiology and management” at the Traders Hotel, Muar to the doctors and pharmacists of Muar, Segamat and Batu Pahat Hospitals, 13 November 2009.

10. Delivered a lecture entitled “Semiology and Management of Adult Epilepsy” at the Neurology Seminar 2009, Tuanku Ampuan Afdan Hospital, Kuantan, Pahang, 4 December 2009.

11. “Management of the first epileptic seizure” at the Medical Department CME, Putrajaya Hospital, 11 December 2009.


13. “Antiepileptic drug and Epilepsy management update” to the pharmacists at Universiti Sains Malaysia Hospital, Kota Bharu, 15 March 2010.


15. “Old and new antiepileptic drugs: quality of life of patients with epilepsy” to 200 neurologists, neurosurgeons, pediatricians and psychiatrists in Ho Chi Minh City, Vietnam, organized by the Neurological Association of Vietnam & GlaxoSmithKline (Vietnam), 14 March 2010.

16. “Special issues in epilepsy management” at the Janssen-Cilag Epilepsy Meeting, Shangri La Hotel, Putrajaya, Malaysia, 27 March 2010.

17. “Special issues in epilepsy management” at the Janssen-Cilag Lunch Symposium, An Update Of Pediatric Neurology 2010, Penang Hospital, Malaysia, 17 July 2010.

18. “Special issues in epilepsy management” at the Neurology Update 2010 of Hospital Raja Perempuan Bainun, Ipoh, Malaysia, 30 July 2010.

19. “Special issues in epilepsy management” at the 5th Conference in Internal Medicine 2010, Grand Riverview Hotel, Kota Bharu, Kelantan, Malaysia, 8-9 August 2010, by Assoc Prof Dr Tan Hui Jan.


Future Plans

1. To hold the 2nd symposium/workshop on awareness of epilepsy to school counselors and teachers in 2011.

2. To enhance the campaign against the use of generic AEDs among doctors and pharmacists.

3. To continue public awareness of epilepsy in public forums and through the mass media.

Officer Election Date

June 2012

Report Submitted By

Annie Tan, Secretariat
MALIAN LEAGUE AGAINST EPILEPSY (LMCE)

Summary of Activities in Relation to Global Campaign in 2009 and 2010
During the period July 2009 to June 2010, LMCE has conducted activities according to its mandate focusing on the following areas:
1. Recognition and visibility at national and international level. After its creation in July 2007, the LMCE follows its objective of institutional recognition at national and international level. We asked and obtained our admission as a Chapter of the International League Against Epilepsy in July 2009.
2. Training. In conformity with its mandate, the LMCE has initiated many training sessions toward three different target populations that are involved in the fight against epilepsy in Mali.

Educational Activities
1. Training of healthcare workers.
   A post-university teaching has been organized in Bamako (capital-town) on the treatment of epilepsy and presented to 70 physicians of Bamako teaching hospitals. In the other regions, three training sessions on the management of epilepsy cases have been organized in the following towns: Kayes, Kati and Ségou. About 20 medical doctors and nurses were present by region. The LMCE, as part of its participation in the activities of the Association of Rural Doctors in Mali, has intervened regularly in the training of physicians in rural areas of the country.

2. Training of the community.
   Raising awareness, communication and education on the theme of epilepsy at school was organized in all of the primary schools of Kati. More than 120 teachers and 2,000 pupils were reached.

3. Training of traditional healers.
   To begin the collaboration with traditional healers, we undertook a series of work and contacting with the quacks of the city of Bamako. An activity concerning the therapeutic approach to the epilepsies was done. In this frame, we have reached 150 traditional healers that are organized in Association. We plan to begin a campaign of raising awareness among this group in 2011.

4. Raising awareness.
   Talks and debate were organized monthly, by members of the LMCE in the Department of Pediatrics, Gabriel Touré Teaching Hospital-Bamako, to the relatives of children, epileptic or not, to improve their knowledge and acceptance of the disease. Moreover, in 2010, the town of Kati, 20 kilometers from Bamako, was chosen to be the site of information and raising-awareness campaigns for pupils and teachers.

5. Care.
   To appreciably improve the accessibility to quality care, the LMCE undertook several activities in the following areas:
   • Raising awareness in the private pharmacies: The LMCE took steps with some pharmacies in Bamako, to improve the availability of antiepileptic medicines.
   • Partnerships with foreign NGOs: To improve the accessibility to medicines for patients with low income, partnerships were introduced and must be researched. So, the LMCE started a partnership with the association “Sabugnuman” from Saint-Sébastien in France which helps to take care of epileptic children in trouble. Presently the project is in its beginning and we have about ten epileptic children completely taken in charge.
   • Support to research: Several doctoral theses in medicine were introduced in association with the Faculty of Medicine, Pharmacy and Dentistry of Bamako. These theses concern essentially community studies “knowledge and attitude of the population toward epilepsy” or “epilepsy in schools”. Others concerning “Epilepsy and road safety” and “epilepsy and traditional medicine” are in progress. Works concerning the etiology of epilepsy in Mali brought insight on this point. This research is about neurocysticercosis, epilepsy during HIV infection, and epilepsy during cerebral malaria.

6. Met difficulties.
   The LMCE is a young organization with very limited means that constitute an important barrier for the implementation of the strategies in the fight against the epilepsy. So, the LMCE does not presently have an operating budget.

Future Plans
During 2011, in addition to the current activities on raising awareness and training, the LMCE plans to widen its field of action with the following items:
• Implement Regional Committees to pursue the work of the LMCE at local level.
• Establish the week of epilepsy in Mali.
• Pursue the work with traditional medicine.
• Pursue the discussion on traditional medicine with the aim of the implementation of a work platform.
• We intend to reinforce our fight in 2010-2011. However we have difficulties in setting up our activities because of our very limited financial means.

Officer Election Date
July 2012

Report Submitted By
Dr Youssoufa Maiga, MD, Secretary-General
EPILEPSY SOCIETY OF MALTA

Publications
Contributions to Atlas of Epilepsy (Springer) and WHO Euro Report

Meeting
20 February 2010: National Conference in conjunction with Caritas Malta Epilepsy Association

Summary of Activities in 2009 and 2010
• Advocacy and promotion about epilepsy in Malta.
• Promoting epilepsy research in Europe through FP7 national contact point.
• Participation in national and international epilepsy and medical conferences.
• Improving therapy and other facilities for persons with epilepsy in Malta.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
Contributor to WHO Euro Report 2010

Educational Activities
• Lectures on epilepsy for medical, pharmacy, social work, nursing students at the University of Malta.
• Lectures on epilepsy to various disability organizations in Malta.

Activities in Conjunction with Local IBE Affiliate
National Epilepsy Conference with over 200 participants; presentations on TV and radio stations; press releases; training for teachers in conjunction with Ministry of Education; training for police officers in conjunction with Police Academy; talks in schools.

Future Plans
Updates of educational videos; updates of educational leaflets; research on epidemiology of epilepsy in Malta

Officer Election Date
2012

Report Submitted By
Janet Mifsud, Secretary-General

MONGOLIAN EPILEPSY SOCIETY

Publications
• “Some influencing factors of epilepsy in 0-7 aged children”. The Journal of Health Sciences University, 2010 (3)
• “Febrile seizure and its influencing factors”. The Journal of Health Sciences University, 2010 (3)

Meetings
October 2009, May 2010

Summary of Activities in 2009 and 2010
Executive Board meeting every six months; Social awareness activities in four provinces and two districts; international exchange activities (Epilepsy Center in Erlangen, Epilepsy Summer Course in San Servolo).

Educational Activities
Improving epilepsy education among the population; Advances in diagnosis and treatment of epilepsy; Quality of life with epilepsy patients

Activities in Conjunction with Local IBE Affiliate
In 2009 and 2010, the Mongolian Epilepsy Association provided the “Quality of Life” program in several provinces.

Future Plans
National epilepsy and EEG/Electrophysiology Conference in May 2011; continue “Quality of Life” program for all provinces and major settlements

Officer Election Date
June 2012

Report Submitted By
A Tovuudorj, MD, Secretary-General

NIGERIAN NATIONAL CHAPTER OF ILAE

Meetings
24-25 November 2010

Summary of Activities in 2009 and 2010
• Inaugural Meeting and Scientific Conference 20 May 2009.
• School Educational Programs Community Neurology Projects (ongoing)
• Numerous Radio Programs

Educational Activities
Two scientific conferences May 2009, November 2010 Secondary School Awareness Programs

Future Plans
Continue school awareness programs in 3-5 schools in 2011; collaboration between state Chapters on research; collaboration with the international body on research; advocacy; bimonthly radio programs

Officer Election Date
2012 (at the Congress)

Report Submitted By
Dr Birinus Ezeala-Adikaibe, Secretary
EPILEPSY ASSOCIATION OF PAKISTAN

Summary of Activities in 2009 and 2010
Epilepsy-related activities (public health awareness, patient-care, academic, etc) in Pakistan have been going on since 1985 when the country’s first formal epilepsy clinic was started at Jinnah Postgraduate Medical Centre, Karachi. Since then, most of the active members of the Epilepsy Association of Pakistan (EAP) have been involved in various epilepsy-related activities evolving into the Comprehensive Epilepsy Control Program of Pakistan (CECP) and the National Epilepsy Centre (NEC). Both these needed a special platform of a non-governmental organization (NGO) for purposes of continuity and sustainability. The volunteers for all these activities are members of EAP. However, there are others whose contribution is on an individual basis. The presence and activities of the NGO run CECP & NEC are in fact the main activities of EAP. EAP, through the auspices of CECP, primarily focused on public awareness of epilepsy. Continued medical education and training of primary-care physicians, especially those who are practicing in the remote areas of the country and are usually the first epilepsy-care providers, was targeted.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
PUBLIC AWARENESS OF EPILEPSY and EFFORTS TO REDUCE STIGMA
Public Health Awareness (ongoing established activity since 2001) has been the prime goal and consistent awareness activities have helped in acceptability of epilepsy as a treatable disorder and stigma reduction. Awareness through electronic and print media, specially designed awareness posters and stickers for vehicles and billboards and graffiti was targeted. Some of the prominent activities are detailed below.

• Epilepsy Awareness Posters: Specially designed large-sized illustrated posters have been used for epilepsy awareness among school children, teachers and the masses of the entire country for more than five years. In the year 2009-2010, 13,188 posters in the National (Urdu) and regional languages were affixed in schools, madrassahs (traditional schools) and prominent public places like chemists, banks, railway stations, intercity bus stands, etc. of more than 40 big and small cities/towns with and covering their adjacent villages. It is estimated that approximately 3.1 million students and teachers and an unaccountable number of population were exposed to this awareness campaign.
• Free Epilepsy Camps: Four Free Epilepsy Camps in small towns of Sindh and Punjab provinces were held. A total of 985 epilepsy patients were given free consultation and counseling. In 2009-2010 this activity took a backseat due to the security problems in the country. Free Epilepsy Camp is one of the most important epilepsy awareness activities in which not only quality consultation and advice is provided but also marks the setting up of a Satellite Epilepsy Centre for near-home epilepsy care and epilepsy awareness in the Free Camp catchment area. A well-chalked out, intensive and effective week long pre-camp epilepsy awareness campaign using handbills, posters, print media, cable TV, mosques, loudspeaker mounted vehicle, graffiti is exposed to 1.2 million general public in a free camp area.
• Awareness Graffiti and Billboards: Through this activity approximately five million people in various cities and towns of the country were exposed to the message “Epilepsy is medically treatable. It is not due to djinn, witchcraft, sorcery, evil eye or other supernatural causes. Contact your doctor for treatment.”

IMPROVED PATIENT MANAGEMENT
Epilepsy Services at National Epilepsy Centre, Karachi is an NGO-run facility at a tertiary-care public hospital.
• Patient Consultation: A total of 1,542 new patients were registered during 2009-2010 and monthly follow-up consultations to the patients were provided.
• Drug Bank: Non-compliance due to cost is the main problem faced in a poor-resourced country like Pakistan. To overcome this, the Drug Bank at NEC provided a regular supply (first-line & some second-line AEDs with additional B-Complex, Folic acid & Calcium supplements). A 30-day supply of medicine was provided at a token cost of PKR 60/- (USD 0.7), equivalent to approximately 8% of the actual cost. The remaining cost (> 92%) was borne by public donors.
• EEG services: Video-EEG recordings are performed at a token cost of PKR 300/- (USD 3.5) as against the commercial rates of Rs. 5000-8000 (USD 60-90). A total of 1,567 Video-EEGs were performed in the reporting years.

Educational Activities
CONTINUED MEDICAL EDUCATION and TRAINING OF PRIMARY-CARE PHYSICIANS
This has been stressed in view of the low number of neurologists in the country. Each free camp was followed by an Epilepsy CME workshop for the district doctors. Seventy primary care physicians were updated on epilepsy diagnosis and management. Special advanced three-tiered physician training workshops were held. Didactic lectures, mock patient assessment and finally assessment of real epileptic patients were the main features of these workshops. The interactive patient-doctor session helped the physicians gain confidence. All these workshops were held under the supervision of senior neurologists of the country. Four hundred and twenty-two doctors attended these workshops.

Future Plans
Epilepsy Association of Pakistan will continue to make efforts to:
• Improve epilepsy-care; primary to tertiary levels.
• Increase public awareness.
• Increase human resource.
• Ensure availability of quality drugs in every part of the country.
• Make efforts to convince governmental agencies about epilepsy being a major health problem requiring special considerations and funds allocation.

Officer Election Date
June 2012

Report Submitted By
Prof Shaukat Ali, President

POLISH LEAGUE AGAINST EPILEPSY

Publications

Meetings
Polish Epilepsy Society Congress 20-21 May 2010

Summary of Activities in 2009 and 2010
The VI Congress of Polish Society of Epileptology was held in Warsaw from 20-22 May 2010, with over 450 health professionals with a special interest in epilepsy attending. Five members received the certification for “epileptology” in 2009 and 2010. During the period between 2009 and 2010 there were several activities organized by the Polish Chapter focusing on continuous education activities (e.g., EEG, Polish School on Epilepsy, Therapeutic challenges in patients with localization-related seizures). The Polish Chapter hosted the Migrating Course on Epilepsy (15-21 August 2010)

Summary of Activities in Relation to Global Campaign in 2009 and 2010
The Polish Chapter actively takes part in adjustment of European Union Directives regulating the Drivers License possibilities for patients with epilepsy.

Educational Activities
The 4th Migrating Course on Epilepsy took place in Serock, Poland, 15-21 August 2010. The course was organized by the joint initiative of the Commission of European Affairs (CEA), ILAE, the Polish Society of Epileptology and EUREPA (administrative work). This course was a continuum of the educational initiative — “Migrating Course on Epilepsy” – that was started in 2007 (Serbia) to take place once a year in different European countries. It was a clinically-oriented course, targeted to specialists at the second and third level of epilepsy care. The course was addressed to applicants providing care for patients with epilepsy and who wish to refine their skills in epileptology. The course program was focused on comprehensive aspects of diagnosis and treatment of epilepsy. It also included the basic sciences in clinical epileptology issues. Different issues of adult and pediatric epileptology have been covered. The course was planned for 36 participants. Initially, 42 applications were received but finally the course was attended by 37 participants. The educational and organizational aspects of the course were rated very well. Additionally two members received support for participation in the Baltic Summer School of Epilepsy (Granavollen, Norway).

Future Plans
• The Polish Chapter is preparing the new version of the recommendations for management of patients with epilepsy. (This includes the new proposals of Classification and Terminology proposed by ILAE.)
• Organization of the National Congress – The next Polish Society of Epileptology Meeting will be organized in Warsaw from 21-23 May 2010.
• Additionally, the Polish Chapter will take an active part in the organization of courses, meetings and conferences on epilepsy including BSSSE 5 which will be held in Sopot/Poland 19-24 June 2010.
• Promotion and support of legislation and regulations in favor of people with epilepsy.
• Collaboration with the health authorities to develop high standards for epilepsy care throughout the country.
• Further support for young doctors and specialists interested in improving their knowledge of epilepsy

Officer Election Date
21 May 2010

Report Submitted By
Maria Mazurkiewicz-Beldzińska, Treasurer

PORTUGUESE LEAGUE AGAINST EPILEPSY

Publications
Notícias da Epilepsia and National and Regional written press interviews

Summary of Activities in 2009 and 2010
• 21st Epileptology National Meeting – Coimbra (13 and 14 March 2009)
• V Spanish/Portuguese Meeting – Seville (24 October 2009)
• II Forum on Epilepsy Surgery – Lisbon (27 November 2009)
• III Forum on Epilepsy Surgery – Oporto (18 March 2010)
• IV Forum on Epilepsy Surgery – Figueira da Foz (1 October 2010)
• VI Portuguese/Spanish Meeting – Lisbon (30 October 2010)
• BIAL Forum – Lisbon (22 November 2010)
CHAPTERS LIST AND REPORTS

Summary of Activities in Relation to Global Campaign in 2009 and 2010

• Creation of the National day of Epilepsy.
• Epilepsy issues discussed on National Television Programs – Sociedade Civil and Bom Dia Portugal.
• Course to epileptic people’s caregivers/parents throughout 2009 with the support of the Calouste Gulbenkian Foundation
• II IBE Encounter of epilepsy
• III IBE Encounter of epilepsy
• IV IBE Encounter of epilepsy
• ‘Living with epilepsy’ project on a national level, co-sponsored by the High Commissariat of Health
• 2009/2010 Organization of the new and shared website – www.epilepsia.pt – and organization of the Facebook page

Educational Activities

• Creation of a DVD – ‘Epilepsy on School’
• Course on Epilepsy, a course directed to teachers – Coimbra (13 March 2009)
• Course on epileptology update – e-Learning (26 October 2009)
• Several workshops and educational update on schools, kindergartens, directed to teachers, students, technicians, and auxiliary staff

Activities in Conjunction with Local IBE Affiliate

• EPI3C – Course to epileptic people’s caregivers/parents throughout 2009 with the support of the Calouste Gulbenkian Foundation
• II IBE Encounter of epilepsy
• III IBE Encounter of epilepsy
• IV IBE Encounter of epilepsy
• ‘Epilepsy outside – Coimbra – with the help of several circus companies
• Several workshops and educational update on schools, kindergartens, directed to teachers, students, technicians, auxiliary staff

Future Plans

23rd Epileptology Meeting – Lisbon (18 and 19 March 2011)

Report Submitted By
Francisco Sales, President

QATAR NEUROLOGY AND QATAR LEAGUE AGAINST EPILEPSY

Publications
Al Hail-Hassan. Epidemiology and Etiology of Intractable Epilepsy in Qatar, Qatar Medical Journal volume 13/number 1; June 2004, pp. 11-13. Regional neurology journals.2-Deleu D, Mesraoua B, Al Hail H, Dsouza A, Mahmoud HA

Meetings

Upcoming Annual Qatar Epilepsy meeting in February 2011

Summary of Activities in 2009 and 2010

• Qatar Annual Neurology and Epilepsy meeting February 2009.
• Five neurologists from Hamad Hospital attended the 28th International Epilepsy Congress, 28 June-2 July, Budapest, Hungary. Dr Al Hail et al participated with an abstract (# p094) Hypothalamic Hematoma.
• Recently, two neurologists had attended the last European Epilepsy Congress 2010, in Rhodes.

Summary of Activities in Relation to Global Campaign in 2009 and 2010

Educational activities:
• Training workshop on Electroencephalography for young neurologists was held in the Department of Neurology in Hamad General Hospital
• Regular training for medical students form Weil Cornell Medical Faculty in Doha
• Participation with epilepsy cases in the Hospital weekly Neurology Grand Round

Educational Activities

• Expert exchange programs for internationally renown neurologist and epileptologist as visiting consultants for patient care and lecture presentations. Last year we invited to 5th Qatar Regional Neurology Conference Prof Dr Wisser from Switzerland and Prof Dr E Perucca from Italy and many other neurologists from the region and also in February 2011, will have more international and national speakers focusing on epilepsy and other neurology topics in 6th Qatar Neurology Conference.
• Published small books on epilepsy written for the public in the Arabic language explaining different aspects of epilepsy symptoms, diagnosis and treatment. The first book (about 100 pages) was written by Dr Hassan Al Hail and the second book (about 200 pages) was written by Dr M. Fawzi, a pediatric neurologist.
• Several education media programs about epilepsy were made for local Qatar TV and local newspapers.
• An intranet site was established in our Hospital website. The website address is http://qatarneuroscience.webs.com/; focusing on epilepsy education and other aspects.
• Our neurology department staff members have attended and participated in many regional, local and international epilepsy Conferences.

Activities in Conjunction with Local IBE Affiliate

The Qatar League Against Epilepsy (QLAE) was established in 1995 and since that time the League is a member and the Qatar Chapter of the International League Against Epilepsy (ILAE) since and the
International Bureau of Epilepsy. During the recent years QLAE had initiated several educational and Congress activities. Several local and regional (Gulf region) neurology and epilepsy Conferences took place.

Future Plans
• 6th Qatar Neurology Conference (at the end of February 2011).
• Increase our staff physician and EEG technologist numbers.
• Several works for publications are in progress: Epidemiology of Epilepsy in Qatar, Knowledge and awareness of epilepsy in epilepsy patients and their families.
• Get approval for a national epilepsy day.

Officer Election Date
January 2011

Report Submitted By
Dr Hassan Al Hail, President and Dr Tag Eldin Sokrab, Secretary-General

SWEDISH EPILEPSY SOCIETY

Summary of Activities in Relation to Global Campaign in 2009 and 2010
Professor Kristina Malmgren from Gothenburg is together with Giuseppe Capovilla from the Italian Chapter responsible for the ILAE project — Fighting epilepsy in Ghana.

Educational Activities
The SES Annual Course was held in Uppsala 13-14 November 2009. Approximately 100 delegates attended the meeting focused on “Antiepileptic drugs and side effects”. Workshops on EEG monitoring in neonatal intensive care, arranged in Uppsala on 12 March with a follow-up on 10 September 2010. A workshop on “Dravet syndrome, from genes to ion channels”, held in Gothenburg on 22 October 2010. Meetings have been arranged during International Congresses for discussions between Board members representing the Swedish, Finnish, Danish and Norwegian Chapters. Members of the Swedish Chapter have been invited to participate in the educational activities in the other Nordic countries during 2010. Visiting professor Torbjörn Tomson was lecturing at the Baltic Sea Summer School in Norway, June 2010.

Future Plans
• Seminar on “Novel treatment strategies for epilepsy,” in Lund, 5 February 2011
• A workshop on standardized EEG-reporting systems for routine evaluations and long-term monitoring, 11 March 2011.
• The SES Annual Course focusing on “Evidence-based epilepsy treatment,” a two-day course in Linköping, November 2011.

Officer Election Date
12 November 2010

Report Submitted By
Kristina Källén, President

SWISS LEAGUE AGAINST EPILEPSY

Publications
Journal Epileptologie, Newsletter, DVDs, and more

Meetings
6th Joint Meeting of the German, Austrian and Swiss Chapters of the International League Against Epilepsy (ILAE) in Rostock, Germany, 20-23 May 2009.

Summary of Activities in 2009 and 2010
Publications
• Journal Epileptologie (Epileptology), publication four times a year, 52 pages each, with information about new developments in epilepsy research and treatment (for professionals, 1,750 copies).
• Newsletter Epilepsie News, publication four times a year, 6 pages each until June 2009, then 4 pages each, with information about the activities of the League and about epilepsy (for laymen, 33,000 copies in German, 10,000 copies in French and 4,000 copies in Italian, since June 2009 no more copies in Italian).
• Brochure on “Prizes and Awards in Epileptology” in German (500 copies).
• Two new information leaflets on “Epilepsy and Sports” and on “Epilepsy and Work” in German (8,000 copies) and French (2,000 copies).
• Annual report in German and French (860 copies).
• Brochure on events of the Swiss League Against Epilepsy in German and French (3,000 copies).
• Edition of the DVD “Dissoziative Anfälle” (500 copies) for professionals.
• Edition of the DVD “Epilepsie / Epilessia” (500 copies) for non-professionals.
• Monthly electronic newsletter (over 29,000 copies/year).
• Brochure on “Prizes and Awards in Epileptology” in German (400 copies).
• Annual report in German and French (850 copies).
• Brochure on events of the Swiss League Against Epilepsy in German and French (2,700 copies).
• Edition of the DVD “Year of the Wolf” with German subtitles (1,500 copies).
• Monthly electronic newsletter (over 100,000 copies/year).

Summary of Activities 2009
• 6th Joint Meeting of the German, Austrian and Swiss Chapters of the International League Against Epilepsy (ILAE) in Rostock, Germany, 20-23 May.
CHAPTERS LIST AND REPORTS

• Three annual events in different cities, for laymen, with several lectures held by epilepsy experts. Main topic: “Life with Epilepsy.”
• Three annual events in different cities, for professionals, with several lectures held by epilepsy experts.
• Main event on the “Day of Epilepsy,” 5 October, in Lucerne. Topic: “Epilepsy and Work.” Open to laymen and professionals.
• Special day for patients and their relatives. Topic: “Epilepsy and Stress.”
• TV Spot “Ensemble” for the French part of Swiss TV
• TV Talk “Xund Epilepsie”, 18 August, TeleBasel.
• “Under 21” Football Semifinals in Sweden, 26 June, with Swiss delegate, Matthias Frei
• Award for the best dissertation of the year in the field of epilepsy research.
• Grant for the most promising study in Switzerland in the field of epileptology.
• Awarding of Professor Heinz Gregor Wieser, former president, with the Tissot medal, offered by the Swiss League against Epilepsy.
• Awarding of the “Hauptmann-Preis” in Rostock, Germany.

Activities 2010
• Three annual events in different cities, for laymen, with several lectures held by epilepsy experts. Main topic: “Life with Epilepsy”.
• Three annual events in different cities, for professionals, with several lectures held by epilepsy experts.
• Main event on the “Day of Epilepsy”, 5 October, in Aarau. Topic: “Epilepsy and Emotions”. Open to laymen and professionals.
• Special day for patients and their relatives. Topic: “Examination methods.”
• Award for the best dissertation of the year in the field of epilepsy research.
• Grant for the most promising study in Switzerland in the field of epileptology.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
2009 Main event on the “Day of Epilepsy”, 5 October, in Lucerne. Topic: “Epilepsy and Work”. Open to laymen and professionals, accompanied by a media campaign.
2010 Main event on the “Day of Epilepsy”, 5 October, in Aarau. Topic: “Epilepsy and Emotions.” Open to laymen and professionals, accompanied by a media campaign.

Educational Activities
2009 Three annual events in different cities, for professionals, with several lectures held by epilepsy experts. Lectures for staff in the pharmaceutical industry.
2010 Three annual events in different cities, open to professionals, with several lectures held by epilepsy experts. Lectures for staff in the pharmaceutical industry.

Activities in Conjunction with Local IBE Affiliate
2009 Special day for patients and their relatives. Topic: “Epilepsy and Stress.”
2010 Special day for patients and their relatives. Topic: “Examination methods.”

Future Plans
• Publication of a series of DVDs for professionals and laymen
• Publication of a Report on Epilepsy in Switzerland, 2012
• Social Research: Survey of Public Attitudes toward Epilepsy in Switzerland

Officer Election Date
Spring 2013

Report Submitted By
Darela Erb, Secretary-General

SYRIAN CHAPTER OF EPILEPSY

Meeting
PAUNS 26-29 May 2010

Summary of Activities in 2009 and 2010
The Main activity is a one-day course in Epilepsy on 26 May 2010 during the Pan Arab Congress Union of Neurological Society (PAUNS) which was held in Damascus 26-29 May 2010. This course was held under the umbrella of ILAE and CEMA.

Educational Activities

Future Plans
Epilepsy course of Continuum TBA later in this year.
CHAPTERS LIST AND REPORTS

Officer Election Date
end of 2011

Report Submitted By
Ahmad Khalifa, President

EPILEPSY SOCIETY OF THAILAND

Publications
Epilepsy Digest

Meeting
Annual Scientific Meeting 21-22 July 2011

Summary of Activities in 2009 and 2010
Since July 2009, the new Executive Committee has started its two-year term. Continuation of the planned policies and activities which were initially planned in early 2009 has been carried out. The 14th Annual Scientific Meeting of the Society on 22 and 23 July was another successful meeting. This year guest speakers were Prof Shorvon and Prof Leppik. In conjunction with the Annual Meeting, the 5th EEG Workshop was held two days on 20 and 21 July. The first Epilepsy Course for In-training neurology and pediatric neurology residents and fellows was setup between 20 and 22 August, which was another successful academic activity. Research activity in the field of epilepsy is being planned and tentatively will be implemented in the year 2011. Education for schoolteachers has been carried on twice in the year 2010.

Summary of Activities in Relation to Global Campaign in 2009 and 2010
One-day education for publics was held in January 2010. Main public activities are led by Epilepsy Association of Thailand with the support from Epilepsy Society of Thailand.

Educational Activities
1. One-day epilepsy course 22 July 2009
2. 13th Annual Scientific Meeting 23-24 July 2009
3. EEG Workshop 20-21 July 2010
4. 14th Annual Scientific Meeting 22-23 July 2010
5. 1st Epilepsy Course for In-training Residents and Fellows, 20-22 August 2010.

Activities in Conjunction with Local IBE Affiliate
Public education

Future Plans
1. Research in the field of epilepsy
2. 15th Annual Meeting on 20-21 July 2011
3. 2nd Epilepsy Course for In-training Residents and Fellows, August 2011.

4. One-day advance course in EEG in July 2011
5. Election for the new Executive Board in April 2011

Officer Election Date
April 2011

Report Submitted By
Anannit Visudtibhan, MD

UNITED STATES: AMERICAN EPILEPSY SOCIETY (AES)

Publications
Epilepsy Currents, AES News

Meetings
Annual Meeting and Biennial North American Regional Epilepsy Congress

Summary of Activities in 2009 and 2010
• The American Epilepsy Society held Annual Meetings in December (Boston, MA in 2009 and San Antonio, TX in 2010). The 2010 meeting was the 3rd Biennial North American Regional Epilepsy Congress. Both meetings were very well attended and provided many thought-provoking sessions. All of the presentations from the AES Annual Meetings are available on the AES website. (http://www.aesnet.org/go/professional-development/educational-opportunities/archived-aes-symposia).
• An ILAE Symposium, organized in cooperation with the North American Commission has been added to the Annual Meeting schedule and will be held each year.
• The Society updated the look and navigation of its website.
• The Society received six-year Reaccreditation with Commendation/Level II from the ACCME to provide CME.
• New web-based CME programs have been added to the AES website (www.aesnet.org).
• A new web-based member database was launched in 2009 and a members-only professional networking site in 2010. These help make finding information and exchanging ideas easier for members.
• AES raised over $15,000 for CLIDEP, the epilepsy clinic in Haiti by setting up an online donation page and soliciting members.

Research Funding
The Society raises money to fund research through its Annual Meeting, fund-raising campaigns and through partnerships with other funding organizations. In addition, it recognizes researchers worldwide for their work in all aspects of epilepsy. Recently, the Society presented awards to Annamaria Vezzani, PhD (Italy) for Basic Science and Josemir W Sander, MD, PhD, FRCP (UK) for Clinical Science.
The Society Funded in 2010 (09/10)
• AES-funded Postdoctoral Research Training Fellowships (3)
• AES and Lennox Trust Fund Pre-doctoral Fellowships (4)
• AES and Grass Foundation Robert S Morison Fellowship (1)
• Milken Family Foundation Early Career Physician-Scientist Awards (1)
• Research Initiative Program (1)
• Research Infrastructure Program (1)
• AES-sponsored Workshops (2)
• Research Recognition Awards (2)
• Targeted Pediatric Partnership (1)

The Society Funded in 2009 (08/09)
• Milken Family Foundation Early Career Physician-Scientist Awards (4)
• AES-funded Postdoctoral Research Training Fellowships (3)
• Postdoctoral Research Training Fellowship funded by the Lennox Trust Fund (1)
• AES and Grass Foundation Robert S Morison Fellowship (1)
• AES and Lennox Trust Fund Pre-doctoral Fellowships (4)
• Research Initiative Program (1)
• Research Infrastructure Program (1)
• AES-sponsored Workshops (2)
• Research Recognition Awards (2)
• Targeted Pediatric Partnership (1)

Educational Activities
• The educational pinnacle of the year is the Society’s Annual Meeting, held in December, which provides a myriad of educational opportunities for clinicians, researchers and other epilepsy professionals. In addition, the Society repurposed all of the sessions from Annual Meetings and puts them on the website (www.aesnet.org) free of charge. The Meeting features one symposium presented in Spanish.
• In addition to many archived programs, the Society also offers web training sessions free of charge. There are two interactive web programs currently available (http://www.aesnet.org/go/professional-development/education).
• Most of the materials in the online Epilepsy Education program have been translated into Spanish. This is a resource for teachers and students consisting of PowerPoint slides and text explaining basic aspects of epilepsy. The materials are available to everyone on the AES website (http://www.aesnet.org/professional-development/educational-opportunities/epilepsy-education-program/epilepsy-education-program).

Activities in Conjunction with Local IBE Affiliate
• AES leadership and staff participated annually in the Epilepsy Foundation’s National Walk For Epilepsy, raising money for research.
• Several members also participated in the Epilepsy Foundation’s Public Policy Institute, learning about advocating to Congress and participated in visits to Congress people. The Society is participating in web-based advocacy efforts of the Epilepsy Foundation.
• Many members are active in national and state Professional Advisory Boards of the Epilepsy Foundation.
• Several research-funding vehicles are partnerships with the Epilepsy Foundation.

Future Plans
• This December, the Society will be celebrating its 75th anniversary in 2011 at its 65th Annual Meeting in Baltimore, MD.
• The new Susan S Spencer Fund was launched in 2010 in memory of Dr Susan Spencer who passed away unexpectedly in 2009. The fund will support its first fellowship starting in 2011.

Officer Election Date
December 2010

Report Submitted By
M Suzanne C Berry, MBA, CAE, Executive Director
## CHAPTER DIRECTORY

(Election dates are published for those chapters that have provided them.)

<table>
<thead>
<tr>
<th>Chapter Name</th>
<th>President</th>
<th>Vice President</th>
<th>Secretary-General</th>
<th>Treasurer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albanian League Against Epilepsy</td>
<td>Jera Kruja</td>
<td></td>
<td></td>
<td>Mira Kapishyzi</td>
</tr>
<tr>
<td>Algerian League Against Epilepsy</td>
<td>Mahmoud Ait-Kaci-Ahmed</td>
<td></td>
<td></td>
<td>Saadi Ibrahim</td>
</tr>
<tr>
<td>Argentinian League Against Epilepsy</td>
<td>Sylvia Kochen</td>
<td>Ricardo Cersosimo</td>
<td>Alfredo Thomson</td>
<td></td>
</tr>
<tr>
<td>Armenian National League Against Epilepsy</td>
<td>Gayane Melikyan</td>
<td>Tatyana Stepanyan</td>
<td>Irena Shaday</td>
<td></td>
</tr>
<tr>
<td>Epilepsy Society of Australia</td>
<td>Andrew Bleasel</td>
<td>Annie Bye</td>
<td>Deepak Gill</td>
<td>Armin Mohamed</td>
</tr>
<tr>
<td>Austrian League Against Epilepsy</td>
<td>Christoph Baumgartner</td>
<td>Martin Graf</td>
<td>Barbara Plecko</td>
<td>Martha Feucht</td>
</tr>
<tr>
<td>Austrian League Against Epilepsy</td>
<td>Susanne Pirker</td>
<td>Eugen Trinka</td>
<td>Noli Rustomov</td>
<td></td>
</tr>
<tr>
<td>Austrian League Against Epilepsy</td>
<td>Martin Graf</td>
<td>Noli Rustomov</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Azerbaijani League Against Epilepsy</td>
<td>Sharif Magalov</td>
<td>Nobil Orbay</td>
<td>Muzharul Manan</td>
<td>Shaheen Akhter</td>
</tr>
<tr>
<td>Bangladesh Epilepsy</td>
<td>M A Mannan</td>
<td>Quazi Deen Mohammad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Belgium League Against Epilepsy</td>
<td>Paul Boon</td>
<td>Patrick Van Bogaert</td>
<td>Eric Schmedding</td>
<td></td>
</tr>
<tr>
<td>Bolivian League Against Epilepsy</td>
<td>Mario Camargo</td>
<td>Federico Fortun De La Quinta</td>
<td>Rafael Prudencio</td>
<td>Wilma Jaldin</td>
</tr>
<tr>
<td>Brazilian League Against Epilepsy</td>
<td>Veriano Alexandre Jr</td>
<td>Wagner Afonso Teixeira</td>
<td>Viera Cristina Terra</td>
<td>Fulvio Alexandre Scorza</td>
</tr>
<tr>
<td>Bulgarian Association Against Epilepsy</td>
<td>Dimitar Borisov Chavdarov</td>
<td>Stojan Panov Bojnov</td>
<td>Melani Radionova</td>
<td>Ruska Cvetanova Yotova</td>
</tr>
<tr>
<td>Cameroonian League Against Epilepsy</td>
<td>Elie Mbonda</td>
<td>Alfred Njamshni Kongnyu</td>
<td>Daniel Charles Ndo Belinga</td>
<td>Callixte Kuate Tegueu</td>
</tr>
<tr>
<td>Canadian League Against Epilepsy</td>
<td>Sharon Whiting</td>
<td>Richard Wennberg</td>
<td>Richard Tang-Wai</td>
<td>Suzanne Nurse</td>
</tr>
<tr>
<td>Chilean League Against Epilepsy</td>
<td>Perla David</td>
<td>Juan Salinas</td>
<td>Marcelo Devilat</td>
<td>Eliana Jeldres</td>
</tr>
<tr>
<td>Chinese Association Against Epilepsy</td>
<td>Li Shichao</td>
<td>Wu Liwen</td>
<td>Hong Zhen</td>
<td>Wu Jianzhong</td>
</tr>
<tr>
<td>Officers Election Date</td>
<td>2012</td>
<td></td>
<td>2010</td>
<td></td>
</tr>
</tbody>
</table>
**CHAPTER DIRECTORY**

<table>
<thead>
<tr>
<th>Organization</th>
<th>President</th>
<th>Vice President</th>
<th>Secretary-General</th>
<th>Secretary</th>
<th>Treasurer</th>
<th>Election Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colombian League Against Epilepsy</td>
<td>Daniel Nariño</td>
<td>Jaime Fandino-Francy</td>
<td>Orlando Carreño</td>
<td></td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Costa Rica Chapter of the ILAE</td>
<td>Franz Chaves Sell</td>
<td>Dennis Chinchilla Weinstock</td>
<td>Alexander Parajeles</td>
<td>Rocio Quesada-Roman</td>
<td>Roberto Brian Gago</td>
<td>9 October 2010</td>
</tr>
<tr>
<td>Croatian League Against Epilepsy</td>
<td>Danilo Hodoba</td>
<td>Igor Prpic</td>
<td>Ljerka Cvitanovic-Sojat</td>
<td>Davor Sporis</td>
<td>November 2012</td>
<td></td>
</tr>
<tr>
<td>Cuban League Against Epilepsy</td>
<td>Salvador Gonzalez Pal</td>
<td>Justo Reinaldo Fabelo Roche</td>
<td></td>
<td></td>
<td>2010</td>
<td></td>
</tr>
<tr>
<td>Epilepsy Society of Cyprus</td>
<td>Savvas Papacostas</td>
<td>Andriani Flourentzou</td>
<td>Eleftherios Papathanasiou</td>
<td>Marina Chryseliou</td>
<td>Costas Michaelides</td>
<td>2010</td>
</tr>
<tr>
<td>Czech League Against Epilepsy</td>
<td>Jan Hadac</td>
<td>Milan Brazdil</td>
<td>Jana Zarubova</td>
<td>Miroslav Kalina</td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Danish Epilepsy Society</td>
<td>Noémi Becser Andersen</td>
<td>Helle Hjalgrim</td>
<td>Hanne Marck Christensen</td>
<td>Poul Jennum</td>
<td>5 March 2010</td>
<td></td>
</tr>
<tr>
<td>Dominican Republic League Against Epilepsy</td>
<td>Diogenes Santos Vitoria</td>
<td>Jose Silie Ruiz</td>
<td>Milagros Gomez</td>
<td>Cristian Damsa</td>
<td>1 January 2008</td>
<td></td>
</tr>
<tr>
<td>Ecuadorian League Against Epilepsy</td>
<td>Patricio Abad</td>
<td>Isacc Yépez</td>
<td>Beatriz Norvaez</td>
<td>Espinosa Sandra</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Egyptian Society Against Epilepsy</td>
<td>Farouk Koura</td>
<td>Tarek Tawfik</td>
<td>Ahmed El-Ghonemy</td>
<td>Mahmoud Allam</td>
<td>October 2009</td>
<td></td>
</tr>
<tr>
<td>Salvadoran League Against Epilepsy (El Salvador)</td>
<td>Claudia Isabel Valencia</td>
<td>Ricardo Alvarenga Quezada</td>
<td>Ricardo Lungo Esquivel</td>
<td>Mauricio Alfredo Muñoz Martinez</td>
<td>Mauricio Ernesto Palacios Marchesini</td>
<td>2010</td>
</tr>
<tr>
<td>Emirates League Against Epilepsy</td>
<td>Jihad Inshasi</td>
<td>Mohd Saadah</td>
<td>Khalid Al Shamsi</td>
<td>Shareefa Abdool</td>
<td>Ahmad Samir</td>
<td></td>
</tr>
<tr>
<td>Finnish Epilepsy Society</td>
<td>Heikki Rantala</td>
<td>Eija Gaily</td>
<td>Leena Jutila</td>
<td>Reina Roivainen</td>
<td>March 2011</td>
<td></td>
</tr>
<tr>
<td>French League Against Epilepsy</td>
<td>Alexis Arzimanoglou</td>
<td>Bertrand DeToffol</td>
<td>Franck Semah</td>
<td>Philippe Ryvlin</td>
<td>Arnaud Biraben</td>
<td>Cecile Marchal</td>
</tr>
<tr>
<td>Georgian Society Against Epilepsy</td>
<td>Tina Geladze</td>
<td>Otar Toidze</td>
<td>Nana Tatishvilli</td>
<td>G Japoridze</td>
<td></td>
<td>2010</td>
</tr>
</tbody>
</table>
German League Against Epilepsy
President Bernd Neubauer
Vice President Holger Lerche
Secretary-General Thomas Mayer
2nd Secretary Hajo Hamer
Treasurer Ulrich Bettendorf
Officer Election Date 1 May 2010

Epilepsy Society of Ghana
President Sammy Ohene
1st Vice President EV Badoe
2nd Vice President Augustina Charway
Secretary-General AK Akpalu
Treasurer Ben Ouave
Officer Election Date 16 July 2009

Greek League Against Epilepsy
President Athanasios Covanis
Vice President Kyriakos Garganis
Secretary-General Vasilis Kimiskidis
Treasurer Stylianos Giannakodimos
Officer Election Date 26 June 2010

Guatemala League Against Epilepsy
President Henry Stokes
Officer Election Date 2008

Guinean League Against Epilepsy
President Amara Cisse
1st Vice President Séle Kourouma
2nd Vice President Bah Fatoumata Binta
Secretary-General Alpha Laha Diallo
Treasurer Mariam Barry
Officer Election Date 2009

Hong Kong Chapter of the ILAE
President Jason KY Fong
Vice President Patrick Kwan
Secretary Colin Lui
Treasurer Gardian CY Fong
Officer Election Date 2009

Honduran Epilepsy Society
President Claudia Amador
Vice President Heike Hesse
Past President Marco T Medina
Secretariat Reyna Duron
1st Secretary Aleyda Rivera
2nd Secretary Rosa Palencia
Treasurer Lazaro Molina

Hungarian Chapter of the ILAE
President Judit Jerney
President-Elect Jozsef Janszky
Secretary-General Zoltan Szupera
Treasurer Istvan Fekete
Officer Election Date 2011

Indian Epilepsy Society
President Satish Jain
Vice President Satishchandra P
Secretary-General Man Mehndiratta
Treasurer Manjari Tripathi
Officer Election Date 18 July 2011

Indonesian Society Against Epilepsy
President Lina Soertidewi
Past President Dede Gunawan
Secretary-General Suryani Gunadharma

Iraq Society Against Epilepsy
President Abdul Mutalib Abdul Kareem
Secretary-General Ghaib Bashar Mohamed Aljandeef
Officer Election Date 2010

Irish Epilepsy League
President Norman Delanty
Past President Joseph McNenamin
Vice President Brian Sweeney
1st Vice President J Morrow
2nd Vice President Michael Hennessy
Secretary-General Mike Glynn
Treasurer Bryan Lynch
Officer Election Date 2010

Israeli League Against Epilepsy
President Uri Kramer
Secretary-General Meir Bialer
Officer Election Date 20 January 2011

Italian League Against Epilepsy
President Ettore Beghi
Secretary-General Giuseppe Capovilla
Officer Election Date 1 June 2011

Jamaican League Against Epilepsy
President Amza Ali
Vice President Robert Gray
Secretary-General Roxanne Melbourne Chambers
Treasurer Judy Tapper
Officer Election Date June 2013

Japan Epilepsy Society
President Sunao Kaneko
Secretary-General Masako Watanabe
Secretary Kiyotaka Hashizume
Officer Election Date October 2013

Jordanian Chapter of Epilepsy
President Waleed Qasem Batayha
Vice President Ali Alrefai
1st Vice President Majed Habahb
<table>
<thead>
<tr>
<th>Country</th>
<th>Name</th>
<th>Position</th>
<th>President</th>
<th>Vice President</th>
<th>Secretary-General</th>
<th>Treasurer</th>
<th>Officer Election Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kazakhstan</td>
<td>Kazakhstan National League Against Epilepsy</td>
<td>President</td>
<td>Roza Alundarova</td>
<td></td>
<td></td>
<td>Orazul Arinova</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kenya</td>
<td>Kenya Society For Epilepsy</td>
<td>President</td>
<td>Paul G Kioy</td>
<td>Max Okonji</td>
<td>Romi Grammaticas</td>
<td>E Amao</td>
<td>April 2011</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td>M Qureshi</td>
<td></td>
</tr>
<tr>
<td>Korea</td>
<td>Korean Epilepsy Society</td>
<td>President</td>
<td>Sang Doe Yi</td>
<td></td>
<td>Yong Won Cho</td>
<td>Kyoung Heo</td>
<td>20 January 2009</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Republic of Kosovo</td>
<td>Association Against Epilepsy of Kosovo</td>
<td>President</td>
<td>Valbana Govori</td>
<td>Nazim Dakaj</td>
<td>Adurrahim Gerguri</td>
<td>Mehdhi Shetu</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td>Nexhat Shatri</td>
<td></td>
</tr>
<tr>
<td>Kyrgyz Republic</td>
<td>Kyrgyz League Against Epilepsy</td>
<td>President</td>
<td>Arstanbek Murzaliev</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary</td>
<td>Asel Ju sopova</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Latvia</td>
<td>Latvian League Against Epilepsy</td>
<td>President</td>
<td>Eglis Vitols</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Lolita Budnika</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lebanon</td>
<td>Lebanese League Against Epilepsy</td>
<td>President</td>
<td>Ahmed Beydoun</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vice President</td>
<td>Naji Riachi</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary</td>
<td>Wassim Nasreddine</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Salim Atrouni</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lithuania</td>
<td>Society of Epileptologists of Lithuania</td>
<td>President</td>
<td>Nerija Vaiciene-Magistris</td>
<td></td>
<td></td>
<td></td>
<td>2011</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vice President</td>
<td>Milda Endziniene</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Jurate Grigoniene</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Arunas Zobakas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Macedonia</td>
<td>League Against Epilepsy of Republic Macedonia</td>
<td>President</td>
<td>Dijana Nikodijevic-Kedeva</td>
<td></td>
<td></td>
<td></td>
<td>2012</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vice President</td>
<td>Emilija Cvetkovska</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Igor Kuzmanovski</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1st Secretary</td>
<td>Ana Doneva</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2nd Secretary</td>
<td>Merita Ismajli-Marku</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Tatijana Cepreganova-Gangovska</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mongolia</td>
<td>Mongolian Epilepsy Society</td>
<td>President</td>
<td>G Tsagaankhu</td>
<td></td>
<td></td>
<td></td>
<td>2011</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>A Tovudorj</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary</td>
<td>P Tsohtsairhan</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Morocco</td>
<td>Moroccan League Against Epilepsy</td>
<td>President</td>
<td>Hamid Ouhabi</td>
<td></td>
<td></td>
<td></td>
<td>June 2012</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vice President</td>
<td>Reda Ouazzani</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Fettouma Moutawakkil</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Saoudi Zemrag</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nepal</td>
<td>Nepal Epilepsy Society</td>
<td>President</td>
<td>J P Agrawal</td>
<td></td>
<td></td>
<td></td>
<td>2008</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vice President</td>
<td>Saroj Ojhia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Rabindra Shrestha</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Pawan Kumar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Netherlands</td>
<td>Dutch League Against Epilepsy (Netherlands)</td>
<td>President</td>
<td>Gerrit-Jan de Haan</td>
<td></td>
<td></td>
<td></td>
<td>December 2010</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Past President</td>
<td>Steven A J de Froe</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>M Veedrick</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretariat</td>
<td>Joke van den Boogaard</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>G Thoone</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Malaysia</td>
<td>Malaysian Society of Neurosciences</td>
<td>President</td>
<td>Raymond Azman Ali</td>
<td></td>
<td></td>
<td></td>
<td>June 2012</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Secretary-General</td>
<td>Sau Wei Wong</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treasurer</td>
<td>Azmi Abdul Rashid</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chapter Name</td>
<td>President</td>
<td>Past President</td>
<td>Secretary-General</td>
<td>Treasurer</td>
<td>Officer Election Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>-------------------------------</td>
<td>-------------------------------</td>
<td>---------------------</td>
<td>----------------------</td>
<td>-----------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Zealand League Against Epilepsy</td>
<td>Peter Bergin</td>
<td>Lynette Sadleir</td>
<td>Elizabeth Walker</td>
<td>Claire Spooner</td>
<td>2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nicaragua Chapter of the ILAE</td>
<td>Foad Hassan Morales</td>
<td>Walter Diaz</td>
<td>Luis Garcia</td>
<td>Pablo Navarrete</td>
<td>14 June 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nigeria National Chapter of ILAE</td>
<td>Ikenna O Onwukewe</td>
<td>Birnius Ezeala-Adikaibe</td>
<td>Oluchi S. Ekenze</td>
<td></td>
<td>2012</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Norwegian League Against Epilepsy</td>
<td>Morten Lossius</td>
<td>Eylert Brodtkorb</td>
<td>Nina Benan</td>
<td>Torliev Svendsen</td>
<td>2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epilepsy Association of Pakistan</td>
<td>Shaukat Ali</td>
<td>Hasan Aziz</td>
<td>Zarine Mogal</td>
<td>Farah Minhas</td>
<td>June 2012</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palestine League Against Epilepsy</td>
<td>Adel Misk</td>
<td>Zayed Afawi</td>
<td>Hesam Amleh</td>
<td>May Mubarak</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panama League Against Epilepsy</td>
<td>Luis Carlos Castillo</td>
<td>Ziad Shqir</td>
<td>Ernesto Triana Bernal</td>
<td></td>
<td>May 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paraguayan League Against Epilepsy</td>
<td>Marta Cabrera de Abente-Arbo</td>
<td>Nancy Monges</td>
<td>Alicia Aldana</td>
<td>Luis Taboada</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peruvian League Against Epilepsy</td>
<td>Alberto Díaz Vásquez</td>
<td>Juan Altamiriano del Pozo</td>
<td>Patricia Campos Olazabal</td>
<td>Daniel Koc Gonzales</td>
<td>15 August 2008</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Philippine League Against Epilepsy, Inc.</td>
<td>Josephine Gutierrez</td>
<td>Marilyn Ortiz</td>
<td>Maritzie Eribal</td>
<td>Lourdes Ledesma</td>
<td>10 September 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polish League Against Epilepsy</td>
<td>Joanna Jedrzejczak</td>
<td>Ewa Motta</td>
<td>Janusz Wendorff</td>
<td>Albena Grabowska-Grzyb</td>
<td>Maria Mazurkiewicz-Beldzinska</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Portuguese League Against Epilepsy</td>
<td>Francisco Sales</td>
<td>Ricardo Rego</td>
<td>João Chavez</td>
<td></td>
<td>21 May 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qatar League Against Epilepsy</td>
<td>Hassan Al Hail</td>
<td>Boulenuar Mesrava</td>
<td>Tag Eldin Sokrab</td>
<td>Osama El Alamy</td>
<td>11 April 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Romania Society Against Epilepsy</td>
<td>Ioan-Radu Rogozea</td>
<td>Al Constantinovic</td>
<td>Al Serbanescu</td>
<td>Claudia Portmann</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Russian League Against Epilepsy</td>
<td>Gagik Avakian</td>
<td>Alla Guekht</td>
<td>Anna Lebedeva</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saudi Chapter of Epilepsy</td>
<td>Sonia A Khan</td>
<td>Suad Al Yamani</td>
<td>Hassaan Al Ayafi</td>
<td>Mohammed Jan</td>
<td>Mohammed Imam Dad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chapter Directory</td>
<td>President</td>
<td>Vice President</td>
<td>Secretary-General</td>
<td>Treasurer</td>
<td>Officer Election Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>--------------------</td>
<td>----------------</td>
<td>-------------------</td>
<td>-----------</td>
<td>-----------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senegal League Against Epilepsy</td>
<td>Momar Gueye</td>
<td>Amadou Gallo Diop</td>
<td>Fatou S Diouf</td>
<td>Momar C Ba</td>
<td>August 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Singapore Epilepsy Society</td>
<td>Shih-Hui Lim</td>
<td>John Thomas</td>
<td>Andrew Pan</td>
<td>Hian-Tat Ong</td>
<td>2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slovak League Against Epilepsy</td>
<td>Vladimir Donath</td>
<td>Pavol Sykora</td>
<td>Svetana Simic</td>
<td>Mirjana Perkovic Benedik</td>
<td>2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slovenian League Against Epilepsy</td>
<td>Igor M Ravnik</td>
<td>Bogdan Lorbner</td>
<td>Matevz Krzan</td>
<td>Svetana Simic</td>
<td>2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>South African Chapter of the ILAE</td>
<td>Roland Eastman</td>
<td>Bryan Kies</td>
<td>James Butler</td>
<td>J Wilmshurst</td>
<td>March 2008</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spanish League Against Epilepsy</td>
<td>Ines Picornell Darder</td>
<td>Manuel Garcia de León Alvarez</td>
<td>Fernando Sanjuan Martin</td>
<td>Gonzalo Alarcon</td>
<td>2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Swedish Epilepsy Society</td>
<td>Kristina Källén</td>
<td>Eva Kumlien</td>
<td>Gunnar Skagerberg</td>
<td>Roland Flink</td>
<td>12 November 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Swiss League Against Epilepsy</td>
<td>Günter Krämer</td>
<td>Giovanni Foletti</td>
<td>Daniela Erb</td>
<td>Christoph Fachlatko</td>
<td>Spring 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Syrian Chapter of Epilepsy</td>
<td>Ahmad Khalifa</td>
<td>Anas Jawher</td>
<td>Sleie Abdulnaser</td>
<td>Imad Eddin Sabbagh</td>
<td>2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taiwan Epilepsy Society</td>
<td>Yen Der-Jen</td>
<td>Chen Chien</td>
<td></td>
<td></td>
<td>2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trinidad Epilepsy Association</td>
<td>William B P Mutaja</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epilepsy Society of Thailand</td>
<td>Somchai Towanabut</td>
<td>Kanlaya Dhiravibulya</td>
<td>Rungsan Chaisewikon</td>
<td>Suwannee Pancharoen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tunisian Association Against Epilepsy</td>
<td>Chahnez Triki</td>
<td>Najoua Miladi</td>
<td>Mohamed Fredj</td>
<td>Amina Gargouri</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Turkish Epilepsy Society</td>
<td>Boris Baklan</td>
<td>Berrin Aktekin</td>
<td>Kadiye Agar Yildirim</td>
<td>Ibrahim Öztura</td>
<td>16 June 2012</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ugandan League Against Epilepsy</td>
<td>Angelina Kakooza</td>
<td>David Basangwa</td>
<td>Augustine Mugarura</td>
<td>Rebecca Wandeka</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ukrainian League Against Epilepsy</td>
<td>Sergey Kharchuk</td>
<td>Galina Maryek</td>
<td>ORR</td>
<td>George Selyukov</td>
<td>16 May 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UK Chapter of the League (United Kingdom)</td>
<td>Philip Smith</td>
<td>Lian Gray</td>
<td>John Duncan</td>
<td></td>
<td>2009</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
American Epilepsy Society (USA)
President John Pellock
Past President John Swann
1st Vice President Frances Jensen
2nd Vice President Jacqueline French
Treasurer Michael Privitera
Officer Election Date December 2011

Uruguayan League Against Epilepsy
President Isabel Rega
Vice President Claudia Camejo
1st Secretary Esmerelda Borriano
2nd Secretary Patricia Braga
Treasurer Nury Sanchez
Officer Election Date 30 November 2011

Uzbekistan League Against Epilepsy
President Yakuthon N Madjidova
1st Vice President Rakhimbaeva S Gulnora
2nd Vice President Ibodulla A Kilichev
Secretary-General Khurshidakhon A Rasulova
Treasurer Diana B Sattarova
Officer Election Date 1 May 2010

Venezuelan League Against Epilepsy
President Beatriz Gonzalez del Castillo
Vice President Brunilda Garcia de Parma
Secretary Beatriz H Guevara
Treasurer Jesus Silvera
Officer Election Date 2010

Vietnam League Against Epilepsy
President Tran Viet Nhi
2nd Vice President Vu Anh Nhi
Secretary-General Le Quang Cuong
1st Secretary Ngo Ngoc Tan
Treasurer Ta Thi Van Anh

Yugoslav Union of Leagues Against Epilepsy
President Nebojsa Jovic
Secretary-General Mirjana Spasic
1st Secretary Ksenija Gebauer-Bukurov
2nd Secretary Nikola Vojvodic
Officer Election Date 2010

Zimbabwe League Against Epilepsy
President Dr Ngwende
Treasurer Douglas Muzengi
Secretary Douglas Ball
Officer Election Date 1 August 2010
Other Activities
2010 Morris-Coole Prize

The Morris-Coole Prize is an annual ILAE award that is given in recognition of an outstanding research paper published in *Epilepsia* the previous year on any field of epilepsy research, either clinical or basic. Papers are nominated to the selection committee by the associate editors of *Epilepsia*. The prize was established to stimulate excellence in epilepsy research as well as rewarding young researchers for outstanding contributions to the field.

Yao-Chung Chuang, MD, PhD

Dr Yao-Chung Chuang was born in Chia-I City, Taiwan. After his medical training from Kaohsiung Medical College, Kaohsiung, Taiwan, he received residence training in clinical neurology from Kaohsiung Chang Gung Memorial Hospital. To prepare himself as a physician-scientist, he then spent one year as a Fellow of Professor Jing-Jane Tsai at the Division of Epilepsy, National Cheng Kung University Hospital, Tainan, Taiwan to receive training in clinical epilepsy research. This was followed by the pursuit of his PhD degree under Professor Samuel H H Chan at National Sun Yat-sen University, Kaohsiung, Taiwan. In the laboratory of Professor Chan, who is National Chair Professor of Neuroscience appointed by the Ministry of Education, Dr Chuang received solid training in neuroscience that integrates systemic physiology with cellular and molecular biology, specializing in cell death and mitochondrial dysfunction.

As a successful physician-scientist, Dr Chuang has moved up the academic ladder smoothly, and is currently an Associate Professor of Neurology and Head of Epilepsy at Kaohsiung Chang Gung Memorial Hospital. During the past seven years, Dr Chuang has competed successfully for the prestigious research grants from the National Science Council, Taiwan, with additional grant support from the Hospital. The thrust of his research includes both clinical and basic aspects of seizure disorders and epilepsy. In his basic neuroscience studies, Dr Chuang created an animal model to investigate the mechanisms that underlie mitochondrial dysfunction and oxidative stress in seizure-induced neuronal cell death. This work has generated six research articles. In his clinical studies, Dr Chuang focuses on cerebrovascular and autonomic functions in patients with epilepsy. His recent work showing that long-term antiepileptic drug therapy contributes to acceleration of atherosclerosis was selected the best paper published in *Epilepsia* during 2009, for which he was awarded the Morris-Coole Prize by the International League Against Epilepsy (ILAE).

In addition to his clinical duties and research activities, Dr Chuang is also an active council member of the Taiwan Epilepsy Society. In his capacity as the President of Kaohsiung Association for Patients with Epilepsy during the past six years, he has spear-headed education of family members on patient care.
CONSTITUTION

Article I — Name
The name of this international organization, founded on 29 August 1909, in Budapest, is the International League Against Epilepsy (hereinafter called “the ILAE”).

Article II — Effective Date
This Constitution is amended and valid as of August 2005.

Article III — Objectives
The objectives of the ILAE are to:
1. Advance and disseminate throughout the world knowledge concerning the epilepsies.
2. Encourage research concerning the epilepsies.
3. Promote prevention, diagnosis, treatment, advocacy and care for all persons suffering from these disorders.
4. Improve education and training in the field of the epilepsies.

Article IV — Methods
To that end, but without restricting the main objectives of the ILAE, and insofar as the same shall be wholly charitable, the ILAE shall:
1. Encourage the establishment and maintenance worldwide of societies with the same objectives as the ILAE (hereinafter designated “Chapters”).
2. Seek to establish and maintain effective cooperation with other organizations worldwide active in the field of the medical sciences, public health, and social care, who are, or may become concerned with problems related to the epilepsies.
3. Promote publications concerning the epilepsies and arrange for the publication of the journal of the ILAE, Epilepsia, and other ILAE educational and informational materials.
4. Organize or sponsor international Congresses, symposia, or other meetings, in particular the International Congress of the ILAE, to be held at the time and place as prescribed in the Bylaws.
5. Appoint special Commissions or individuals for the purpose of studying specified problems related to the aims of the ILAE and making recommendations for implementation of specific activities.
6. Develop and apply other methods consistent with the objectives of the ILAE.

Article V — Legal Status
The ILAE is a non-profit, tax exempt, international organization incorporated in the District of Columbia, USA.

Article VI — Membership
1. Member Chapters are composed of professionals who are involved in patient care or research in epilepsy and whose primary concern is with the problems of epilepsy. The minimum membership of a Chapter is nine professionals which is deemed to be the minimum number that would allow the rotation of President, Secretary-General, and Treasurer. Exceptionally, a Chapter may consist of a mixed professional and lay membership for a period of time. In this situation, only professional members constitute the basis for dues, voting, and holding office.

2. There shall be only one Chapter in each country defined as any State recognized as a member of the United Nations and/or World Health Assembly. When there is more than one eligible organization in a country, the Executive Committee shall recommend for membership that organization which, in its opinion, can best accomplish the objectives of the ILAE. Organizations in territories/regions that do not fall within the above definition of a State may exceptionally be considered for membership by the Executive Committee and ratified by the General Assembly.

3. The Chapters shall be voted into the ILAE upon the approval of the Executive Committee and two-thirds vote of those attending the meeting of the General Assembly. Pending approval by the General Assembly, a prospective Chapter may be provisionally admitted to the ILAE by decision of the Executive Committee which will entitle the prospective Chapter to all rights of membership except the right to vote.

4. By applying for membership a prospective chapter agrees to fulfill all obligations of Chapters as stated in this Constitution and Bylaws. Chapters are autonomous societies, but their Constitutions must not contain articles inconsistent with the Constitution of the ILAE.

5. A prospective Chapter becomes a Chapter after approval by the General Assembly, submission to the Secretary-General of a list of names and addresses of its own members, and payment of its dues.

6. A Chapter may withdraw from membership by giving notice in writing to the Secretary-General.

7. On recommendation of the Executive Committee, membership may be terminated by a two-thirds vote of those attending the meeting of the General Assembly, if the Chapter fails to pay its annual dues or if, for any other reason, it no longer fulfills the stated requirements for membership.

8. The Chapters are organized into Regions as determined by the Executive Committee.

Article VII — Governance
The ILAE shall be governed by the Executive Committee and the General Assembly.

Article VIII — The Executive Committee
1. The Executive Committee shall conduct the affairs of the ILAE subject to ratification by the General Assembly.

2. The Executive Committee shall consist of:
   a. The President, Secretary-General, Treasurer, Vice Presidents, and the Immediate Past President as elected members. Only elected members shall have the right to vote.
   b. The President, Secretary-General and Treasurer of the International Bureau for Epilepsy, (hereinafter called the “IBE”), as Ex-Officio, non-voting members.
   c. The Editor-in-Chief of Epilepsia and the Information Officer as non-voting members.
3. The term of office for elected Executive Committee members is four years. Candidates for the presidency must have served, or be in the process of serving, at least one term on the Executive Committee. After serving as President, the person shall automatically serve one term as Immediate Past President. The President and the Immediate Past President shall serve one term. The Vice Presidents, the Secretary-General, and the Treasurer may be re-elected for one additional term to any one of these offices. Thereafter, they may only be elected to the presidency.

4. The Editor-in-Chief of Epilepsia and the Information Officer shall be appointed by the Executive Committee and serve at their discretion. The term of office can not exceed twelve years.

5. Should any vacancy in the Executive Committee occur it shall be addressed by the Executive Committee subject to ratification by the General Assembly.

6. No person may occupy a seat on the Executive Committee for a period exceeding a maximum of sixteen years.

7. The President shall appoint an independent Elections Commission, of five persons, each representing different Regions, and chaired by the Immediate Past President. The Executive Committee shall not interfere with the business of the Elections Commission. The Commission is to conduct the elections and establish appropriate procedures that are not in conflict with the Constitution and Bylaws and respect the following constraints:

The Elections Commission shall be responsible for fully informing all Chapters about the elections process and its procedures eighteen months in advance of the meeting of the General Assembly during which the new Executive Committee takes office.

The election of the President will be carried out first, followed by the election of two Vice Presidents, Secretary-General, and Treasurer.

The geographic distribution of the elected officers, including the President, shall be restricted as follows: Each of the five elected officers must be primary members of different Chapters. Primary membership is defined by the location of where professional activities are performed. No more than two members of the Management Committee shall come from the same Region, as defined by the geographical division accepted within ILAE, and no more than three of the five elected officers shall come from the same Region.

8. In the event that after the global elections of President, two Vice Presidents, Secretary-General, and Treasurer, and the appointment of Editor-in-Chief and Information Officer, any fully operational Region of the ILAE (as determined by the Executive Committee) is not present on the Executive Committee, the Chapters of this Region shall elect an additional Vice President. This Vice President will be a voting member of the Executive Committee and not be considered as a regional Vice President but unrestrictedly share the global responsibilities of the Executive Committee.

9. The Executive Committee may hold meetings at any time or in any place which may be convenient to its members; it may conduct its business also by other appropriate means of communication. Only business of which minutes have been made, acknowledged by the members of the Executive Committee who participated, will be considered legal business of the Executive Committee.

10. Two-thirds of the voting members of the Executive Committee constitute a quorum. Decisions are made by a majority of the voting members attending. In the event of a tie, the President has a deciding vote.

Article IX — The General Assembly

1. The General Assembly consists of all approved Chapters of the ILAE.

2. Regular meetings of the General Assembly shall be convened during each International Congress of the ILAE. Participants shall consist of one delegate from each Chapter who carries the total number of votes of that Chapter.

3. Representatives from more than fifty percent of the Chapters attending a meeting of the General Assembly shall constitute a quorum. Decisions will be taken by a majority of the votes of those attending.

4. The General Assembly shall receive and consider for vote of approval the reports of the President, the Secretary-General, and the Treasurer.

5. The General Assembly shall vote on proposals submitted by the Executive Committee.

6. The General Assembly shall approve the admission of new Chapters and the termination of membership of Chapters.

7. The General Assembly shall set the time and place of future Congresses, after recommendation by the Executive Committee.

8. Meetings of the General Assembly are open unless a number exceeding ten percent of the delegates present requests the Chair to close the meeting to observers. Only delegates may speak and vote. Exceptionally the presiding officer with the approval of the General Assembly may invite a non-delegate to speak, but not to vote.

9. Between regular meetings of the General Assembly, should urgent business arise requiring General Assembly action, this shall be carried out in writing, using available technology as determined by the Executive Committee. Such business must involve responses from at least fifty percent of the Chapters, and decisions would require a majority of the votes of those responding.

10. Chapters whose total votes correspond to a minimum of twenty-five percent of all available votes may request a written consultation by mail of the General Assembly. Reasons for doing so must be sent to the Executive Committee ninety days before the consultation.
Article X — Finances
1. The ILAE shall have the authority to accept and administer gifts, legacies, movable or immovable properties, donations, and assets of any kind without any restrictions as to the amount or value and to collect annual dues of its Chapters.
2. The assets of the ILAE shall be used to further the objectives of the ILAE as authorized by the Executive Committee.
3. No portion of the assets of the ILAE shall be paid directly or indirectly to any Officer, members of its Commissions and Task Forces, or officers of its Chapters, except for payment of expenses made in the interest of the ILAE.
4. Proper books of account shall be overseen by the Treasurer and they shall be certified by a qualified auditor at the end of each fiscal year.

Article XI — Epilepsia
1. The Editor-in-Chief of Epilepsia shall be responsible for editing Epilepsia in accordance with the general policies established by the Executive Committee.
2. The Editorial Board shall consist of editors appointed by the Editor-in-Chief. The term of office of the editors is four years and editors may be reappointed.
3. The editorial Advisory Board of Epilepsia shall consist of the Executive Committee and shall approve all contracts related to the publication of Epilepsia.
4. All financial responsibilities of Epilepsia reside with the Treasurer and the Executive Committee of the ILAE.

Article XII — Information and Communication
The Information Officer oversees the collection of relevant information on epilepsy according to a policy agreed by the Executive Committee and ensures its availability to professionals throughout the world.

Article XIII — Commissions and Task Forces
1. Commissions and Task Forces in unlimited number may be appointed by the President of the ILAE as recommended by the Executive Committee. The President, Secretary-General and Treasurer of the ILAE shall be Ex-Officio members of all Commissions and Task Forces, except the Elections Commission.
2. No expenses shall be incurred by a Commission or Task Force on behalf of the ILAE without the consent of the Executive Committee.
3. Annual budgets and financial reports of the Commissions and Task Forces must be approved by the Executive Committee.

Article XIV — International Bureau for Epilepsy
1. A privileged relationship exists between ILAE and IBE as partners for addressing respectively the professional and social aspects of the epilepsies.
2. ILAE and IBE will establish appropriate administrative structures that will facilitate the accomplishment of mutual objectives.

Article XV — Amendments
1. The present Constitution may be amended by a two-thirds vote of those attending the meeting of the General Assembly.
2. Amendments may be initiated by the Executive Committee, or by Chapters whose total votes correspond to a minimum of twenty-five percent of the votes of the General Assembly. Such amendments must be submitted to the Secretary-General at least ninety days before the next meeting of the General Assembly, and due notice of such amendments shall be given to all Chapters by the Secretary-General at least sixty days before the meeting of the General Assembly.

Article XVI — Dissolution or Merger
1. The ILAE may be dissolved or merged with another body having similar objectives on proposal of the Executive Committee, ratified by two-thirds of the available votes of the General Assembly as well as two-thirds of the total number of Chapters.
2. In the event of dissolution, the assets of the ILAE may not be divided among its members but shall be transferred to one or more other international organizations of similar interests, as agreed by the General Assembly.
I. Elections

1. For each phase of the election, the Elections Commission shall ascertain if candidates are available and willing to serve. Candidates will provide the Elections Commission with appropriate background information on their candidacy. This information will be sent to each Chapter and published in appropriate League publications.

2. Each Chapter has from 1-6 votes depending on the number of dues-paying members in good standing.

3. For the election of the President, the Elections Commission shall submit to the Chapters a list of persons fulfilling the requirements of the Constitution (Article VIII, 3), who are available and willing to serve and will ask each Chapter to vote for one of them. If one of the candidates receives more than fifty percent of all possible votes, that candidate shall be elected. If this is not the case, a run-off shall be held between the two candidates that received the highest number of votes. The candidate in the run-off that receives the highest number of votes cast shall be elected. If both candidates receive the same number of votes, the Elections Commission has the final choice.

4. Following completion of the Presidential Election, the Elections Commission shall request each Chapter to submit a slate of four names as candidates for the remaining officer positions.

5. The geographic representation of the candidates must allow for the eventual election of officers who meet the geographic distribution requirement stated in the Constitution (Article VIII, 6).

6. The Elections Commission shall choose a slate of no more than twelve candidates on the basis of weighted multiple nominations from the lists submitted by the Chapters. The Commission shall ascertain that these candidates are available and willing to serve.

7. The Elections Commission shall then submit the slate to each Chapter for voting by mail, e-mail, or fax. This is the fourth and final stage in the process election. If two or more candidates obtain the same number of votes the Elections Commission has the final choice.

8. The Elections Commission will, with the advice and consent of the President-elect, appoint the Secretary-General, Treasurer, and two Vice Presidents from the newly elected slate.

II. Duties of Officers

1. The President shall preside at meetings of the Executive Committee and the General Assembly.

2. The President, Secretary-General and Treasurer shall act as Management Committee in between meetings of the Executive Committee. Their actions shall be subject to ratification by the Executive Committee.

3. The Vice Presidents shall assist the President, and the First Vice President shall assume the duties of the President in his absence. In case of the inability of the first Vice President to serve, his place shall be taken by the Second Vice President.

4. The Secretary-General shall conduct the affairs of the League under the direction of the Executive Committee.

5. The Treasurer shall administer the accounts of the League.

III. The General Assembly

Unless otherwise indicated, matters brought before the General Assembly shall be decided by majority of vote of those attending an official meeting or responding to a mail ballot. The number of votes accorded to each Delegate shall depend on the number of professional dues paying members in his/her Chapter according to the most recent statement provided by the Chapter. The number of votes shall be determined by a sliding scale where a second vote is obtained when the membership has passed the number of 50, and where the increase of membership giving an additional vote doubles for every step. There shall be a maximum of six votes for any Chapter:

- up to 50 members ................. 1 vote
- 51-150 members .................. 2 votes
- 151-350 members .................. 3 votes
- 351-750 members .................. 4 votes
- 751-1,500 members ................. 5 votes
- above 1,500 members .............. 6 votes

Chapters that do not collect dues shall have one vote.

IV. Epilepsia

1. The Editorial Advisory Board shall advise the editors on matters of general policies and arbitrate on matters referred to it by the Editor-in-Chief, but shall leave the day to day conduct of the Journal entirely to the Editor-in-Chief and the Editorial Board consisting of the editors, working with the publisher.

2. The Executive Committee shall approve or terminate any contract with the publisher. It shall determine the budget of Epilepsia.

3. The Editor-in-Chief will take all steps necessary to fulfill the aims of the League through its Journal, Epilepsia. The Editor-in-Chief shall: conduct the day-to-day business of the Journal in conjunction with the Editorial Board and the publisher; have final responsibility for the acceptance or rejection of manuscripts; call meetings of the Editorial Board in special situations; recommend a budget for
V. Information and Communication
1. The Information Officer supervises the publication of Epigraph at least twice annually.
2. The Information Officer is responsible for the information published on the website and serves as Chair of the Website Task Force.
3. The Information Officer oversees the activities of, and the contract with, the Epilepsy Information Center.

VI. Commissions and Task Forces
1. Each Commission and Task Force shall have a Chair appointed by the President.
2. The term of office of each Commission shall expire at the end of the term of the Executive Committee, but it may be renewed in the same or a revised composition by the new President of the ILAE.
3. Task Forces are appointed for specific purposes and their term of office expires when their duties are completed.
4. The Chair of each Commission and Task Force shall make interim reports and recommendations to the Executive Committee as deemed necessary and, shall submit a final report at the conclusion of their term. Said final report shall be communicated to the Chapters.

VII. Chapters’ Obligations
1. Each Chapter must send to the ILAE Secretary-General the names and contact information of its officers within thirty days after the Chapter’s General Assembly Meeting during which a new Executive Committee takes office. Documentation, such as minutes of this meeting, must accompany the contact information. If changes in contact addresses occur these must be immediately reported to the Secretary-General of the ILAE.
2. In March of each year, every Chapter shall send to the ILAE’s Secretary-General the names and addresses of its members as of 31 December of the previous year.
3. Before July 1 of each year, each Chapter shall pay to the ILAE, annual dues which shall be proportional to the number of dues-paying members as of 31 December of the previous year, and shall be fixed for each fiscal period of the General Assembly. Dues for a Chapter are 3% of the annual dues that the Chapter charges each member, multiplied by the number of Chapter members, or a minimum payment of $10 (US) whichever is highest. In countries where exchange regulations do not allow for remittance of funds outside the country, then Escrow accounts may be established with the approval of the ILAE Treasurer.
4. If a Chapter without consent of the Executive Committee omits paying its dues it will be once warned to do so. If the next year dues are again not paid the Executive Committee will propose disaffiliation to the General Assembly by mail ballot. Two-thirds of votes cast (with at least two-thirds of all available votes having been cast) have to confirm disaffiliation.

VIII. Fiscal Year
The fiscal period of the ILAE shall be 1 July through 30 June.

IX. Staff
1. The location of the ILAE’s Headquarters Office will be determined by the Executive Committee.
2. The Executive Committee is empowered to retain such staff and contract for other professional services as may be necessary to carry out the functions of the League.

X. Meetings
1. The International Congress of ILAE shall be held ordinarily every two years, in conjunction with the International Bureau for Epilepsy.
2. In the year between two International Congresses of the ILAE, the Regional Divisions of the ILAE will organize Regional Congresses with the support of the ILAE.
3. The ILAE may sponsor or support, wholly or in part, other meetings relevant to its objectives. Such a meeting shall not be designated as an International Congress of the League.

XI. Regions
1. Regional Commissions shall consist of representatives elected by local Chapters together with a Chair and Secretary appointed by the ILAE President. Chapters can belong to only one Region.
2. Regional Commissions should meet from one to three times a year and must submit an annual budget for approval to the Executive Committee.
3. Regional Councils may be established to include members from all local Chapters. In some Regions, Councils may include non-voting members from countries without Chapters. Councils are expected to meet at least once per year.
4. Regional Commissions should aim to develop, stimulate and coordinate the epileptology agenda in their part of the world.
5. Regional Commissions should promote the activities of local Chapters, encourage similar policies and administrative structures and facilitate their involvement within the global ILAE agenda.
6. Regional Commissions should coordinate local educational activities via the formation of a regional epilepsy academy.
7. Regional Commissions should run their Congresses under the direction of the International Director of Meetings (IDM).
8. Regional Commissions should review epilepsy services and the size of the treatment gap in each country and aim to improve the former and reduce the latter.
9. Regional Commissions should develop documents with the aim of stimulating local medico-political initiatives and improving patient care.

XII. Cooperation with the International Bureau for Epilepsy (IBE)
1. ILAE shall cooperate with IBE on all levels... international, national, regional, and chapter to ensure maximum efficiency in promoting quality of life for people with epilepsy.
2. Each ILAE Chapter shall promote the establishment and/or assist in establishing a Chapter of the Bureau, if such a Chapter does not exist.

3. At least annually, and more frequently if possible, the Executive Committee shall meet jointly with the Executive Committee of the IBE, to consider matters of mutual interest and/or responsibility to both ECs. Such a meeting shall be known in full as a Joint Meeting of the Executive Committees of the IBE and ILAE, and in brief as a JEC.

4. A JEC shall have no financial or constitutional power or existence independent of the Executive Committees of the IBE and ILAE. It is a meeting of two separate and independent Constitutionally-defined bodies, not an entity in itself.

5. Matters to be considered by a JEC shall include international Epilepsy Congresses, the Global Campaign, the Epilepsy Website, the International Resource Center, and such other matters as the IBE and ILAE Executive Committees shall consider appropriate to be delegated to consideration and decision by a JEC.

6. A proposed action by a JEC should not be in conflict with the Constitution of the ILAE and must be ratified by the two ILAE and IBE Executive Committees prior to implementation.

7. Chairing of each JEC shall be shared equally between the IBE and ILAE Presidents, or their nominees, in a manner acceptable to both. The Chairperson of a JEC shall not have a casting (i.e., tie-breaking) vote.

8. A quorum for a JEC shall be the presence of a majority of the members of each of the IBE and ILAE Executive Committees.

9. A JEC may be called at any time mutually acceptable to the Presidents of both IBE and ILAE.

10. To be considered by a JEC, a motion must be moved by a member of one Executive Committee, and seconded by a member of the other.

11. Members of the Management Committee of each of the IBE and ILAE, although Ex-Officio members of both Executive Committees, shall each have only one vote in a JEC meeting.

12. Responsibility for administration, minuting, etc. of JECs shall be shared equally between the Secretaries-General of the IBE and ILAE, in a manner acceptable to both.

13. Responsibility for overseeing all financial matters considered by JECs shall be shared equally between the Treasurers of the IBE and ILAE, in a manner acceptable to both.

A Joint Management Committee, consisting of the Management Committees of each of the IBE and ILAE, is authorized to take actions in the name of a JEC between JEC meetings. Such actions must:

a. Be approved by a majority (i.e., two members) of each of the Management Committees of the IBE and ILAE.

b. Be in accord with policies of both the IBE and ILAE.

c. Involve neither Executive Committee in expenditure exceeding a sum to be set by each Executive Committee.

d. Be notified to each Executive Committee as soon as possible.

e. Be ratified by each Executive Committee at its next meeting.

XIII. Indemnification

Executive Committee members, officers, and other authorized staff, volunteers, or agents of the ILAE shall be indemnified against claims arising in connection with their positions or activities on behalf of the ILAE to the full extent permitted by law.

XIV. Amendments

The Executive Committee shall have the power to amend these Bylaws by the affirmative vote of a majority of the voting Executive Committee members then in office, provided that notice of the proposal to amend the Bylaws is provided to the Executive Committee with at least thirty days notice.