1) Welcome and Opening Remarks – A Ikeda, Chairman, ILAE-AO (5 min)
A Ikeda opened the meeting and thanked all for attending. He noted that the Chapter Convention usually happens during the AOEC, but given that the Congress is now taking place online, it was decided to hold this meeting one week earlier, to allow for last minute preparations for the Congress. He conveyed J Dunne’s apologies, who could not attend owing to work commitments. Next, he presented the agenda.
2) Introduction of Chapter Representatives-(5 min)
A Ikeda asked for all Chapters to present themselves as follows:

<table>
<thead>
<tr>
<th>Country</th>
<th>Representatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>E Somerville, D Gill</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>M Mannan</td>
</tr>
<tr>
<td>Cambodia</td>
<td>P San</td>
</tr>
<tr>
<td>China</td>
<td>S Li, Z Hong, D Ding</td>
</tr>
<tr>
<td>Hong Kong</td>
<td>H Leung, E Fung</td>
</tr>
<tr>
<td>India</td>
<td>M Tripathi, MM, Mehndiratta, PS Chandra, KP Vinayan</td>
</tr>
<tr>
<td>Indonesia</td>
<td>A Catur, F Octaviana</td>
</tr>
<tr>
<td>Japan</td>
<td>K Kawai, Y Takahashi</td>
</tr>
<tr>
<td>Korea</td>
<td>BC Lim</td>
</tr>
<tr>
<td>Malaysia</td>
<td>CS Khoo</td>
</tr>
<tr>
<td>Mongolia</td>
<td>A Tovudoorj, D Munkhzul</td>
</tr>
<tr>
<td>Myanmar</td>
<td>S Oo</td>
</tr>
<tr>
<td>Nepal</td>
<td>P Shrestha, S Ojha</td>
</tr>
<tr>
<td>New Zealand</td>
<td>S Davis</td>
</tr>
<tr>
<td>Pakistan</td>
<td>Z Mogal, H Mahmud</td>
</tr>
<tr>
<td>Philippines</td>
<td>J Ahorro, R Salonga-Quimpo, C Cruz Urbi, M Fernandez</td>
</tr>
<tr>
<td>Singapore</td>
<td>D Chan, R Rathakrishnan</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>J Wanigasinghe</td>
</tr>
<tr>
<td>Taiwan</td>
<td>HY Yu</td>
</tr>
<tr>
<td>Thailand</td>
<td>K Katttnayuwong, C Limotai</td>
</tr>
<tr>
<td>Vietnam</td>
<td>absent</td>
</tr>
</tbody>
</table>

3) Address by ILAE President - S Wiebe (10 min and 5 min discussion)
S Wiebe stated that he hoped the next Chapter Convention would be in person. He added how impressed he was by the volume and capacity of activity within each of the countries in Asia/Oceania and also in the broader region. As the outgoing President, he noted that this would be his last address to an AO Chapter Convention, as such he passed the floor to H Cross, the President Elect. H Cross stated how pleased she was to see everyone and regretted that she could not meet everyone in person. She echoed Sam’s sentiments by affirming how impressed she was by the activities taking place within the Chapters and the region and stated how much she was looking forward to working with everyone over the coming four years.

4) CAOA Activities and Reports
ILAE-AO Report, A Ikeda, Chairman, ILAE-AO (15min; 10 mins including discussion)
A Ikeda began by thanking everyone present for their co-operation over the previous four years. He noted that there are 21 Chapters in the region, which, despite being geographically and culturally divergent, have shared goals and common aims making for a strong network. Next, he introduced the ILAE-AO Committee (see attendance Page 1).

At a recent ILAE Executive Committee meeting he presented, as Chair of the region, the activities of the previous four years under three broad headings:

i. What has gone well and what should continue (green text below)
ii. What has gone slowly well (yellow text below)
iii. What should be amended

He was pleased to report that iii was not relevant and proceeded to cover the activities during his term while referring to the grading above.

Developed 10 years previously, he reminded everyone of the aim of the ILAE-Asia/Oceania region ‘to develop, stimulate and coordinate epileptology initiatives in the region’. He then listed the following points under the mission:

1. To advance and disseminate knowledge concerning the epilepsies throughout the
Asian & Oceanian region

2. To improve education and training in the field of the epilepsies in Asia via the activities of the Asian Epilepsy Academy (ASEPA)

3. To organise the Asian Oceanian Epilepsy Congresses together with the International Director of Meetings and IBE’s Regional Executive Committees

4. To facilitate clinically relevant epilepsy research in Asia

5. To serve as a link between ILAE, IBE, WHO and regional medical organisations to promote prevention, diagnosis, treatment, advocacy and care for all persons suffering from these disorders in the Asian and Oceanian region. *(He particularly thanked each Chapter for its efforts with local governments to advance the Intersectoral Global Action Plan)*

6. To promote the activities of the local chapters, coordinate policies and administrative structures and facilitate their involvement within the global ILAE agenda

7. To review epilepsy services and the size of the treatment gap in each country and aim to improve the former and reduce the latter

Next, he moved to discuss the ASEPA activities, first showing a map with the location of initiatives that have been completed in 2016. He then presented details about the EEG Certification Exam which has been led by SH Lim since 2006:

i. ASPEA-ASNA EEG Certification Examination
   In collaboration with the ASEAN Neurological Association (ASNA) since 2005; for candidates from Asian/Oceanian region except China and India.

ii. ASEPA-ASNA-CAAE EEG Certification Examination
    In collaboration with China Association Against Epilepsy (CAAE) since 2009; for candidates in China

iii. ASEPA-ASNA-IES EEG Certification Examination
    In collaboration with Indian Epilepsy Society (IES); from 2012, for candidates in India
   
   Part 1: 741 took the exam, 482 passed (Passing Rate: 65%)
   Part 2: 431 took the exam, 331 passed (Passing Rate: 72.2%)

At the last AOEC in Bali 2018, the Asian/Oceanian committee declared that the subsequent 10 years, 2019-29, would be ‘A decade of EEG and Epilepsy Education’ to coincide with the centennial anniversary of the first human EEG reported in 1929 by Hans Berger of Germany.

Referring to ASEPA meetings, he noted that this would be covered by Prof. Kwan shortly in his presentation and regretted that COVID19 had stopped activities, which, he hoped would be resuming shortly.

Next, he covered, the collaborations with the WHO’s Western Pacific Regional Office, South East Asia Regional Office and IBE giving special recognition to A Guekht, H Cross and S Wiebe for instigating these successful relationships. Last September at the WHO’s regional meeting, a joint ILAE/IBE statement was made under Agenda Item 13, referring to ‘Safe and affordable surgery’ as follows:

i. Epilepsy is one of the most common, long-lasting chronic diseases worldwide
ii. Epilepsy has been proven to be a surgically remeable disease
iii. Epilepsy surgery is not popular at all in the Asian region
iv. The current pandemic significantly affects epilepsy care in all aspects
v. Epilepsy and its synergies with other neurological disorders is needed in continuum of wide spectrum

Next, he explained that the Research TF has been active and that KS Lim would later expand on this during this meeting. The Epilepsy Surgery TF was recently set up, but its progression has been hampered by the pandemic. Again, this will later be expanded upon by SP Chandra and K Kawai during this meeting.

He next referred to a proposal by Nihon Kohden to support the education activity of AO/ASEPA in general, noting that the company has submitted a detailed PowerPoint presentation to A Ikeda. He added that they may be interested in supporting a remote digital EEG reading system and/or provision of EEG hardware. Finally, he presented the challenges facing the region for the next term 2021-25:

i. **Education**
   - Promote teaching activity with faculty development (Senior/Junior faculty working together)

ii. **Research**
   - Registry database study widely announced to ILAE-AO with Epi-NET

iii. **Global advocacy activity**
   - Ongoing collaborations with WHO regional offices i.e., Southeast Asia and Western Pacific

iv. **Local Chapter activity**
   - Promote international scholarship. After the pandemic this will resume

**ASEPA Report, SY Kwan, Chairman ASEPA (10 mins, including discussion)**

SY Kwan began by introducing the ASEPA committee members, noting the current term runs from 2019-2023. Aim of ASEPA

- Clinical workshops and training
- Interactive teaching sessions
- ASEPA-ANZAN EEG training
- Epilepsy training fellowships – to create local leaders and educators
- ASEPA-EEG certification
- Others

All Face-to-Face meetings have been postponed; meetings which have been very successful throughout the previous decade. The pandemic is presenting challenges to how we continue to build on this success. He called on all Chapters in the region to help ASEPA during this difficult time to achieve its aims listed above. Plans have been altered and a new strategy has been created:

- Changing all recent teaching courses to virtual
- Possible ways
  - Live stream with real-time interaction
  - Web-based teaching with pre-recorded lectures with small interaction groups
  - Didactic lectures with Q&A
  - Others e.g., online teaching materials
- Need to include:
  - Basic epilepsy science/research (e.g., translation medicine) in epilepsy
He next listed the completed ASEPA activities during 2020 and 2021, reiterating once again that the pandemic reduced the number of initiatives that took place.

### Completed Activities

<table>
<thead>
<tr>
<th>City/Country</th>
<th>Organiser(s)</th>
<th>Date (Status)</th>
<th>Persons in Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>KL, MY</td>
<td>Local Chapter &amp; ASEPA</td>
<td>11-13/01/20</td>
<td>KS Lim, C Wong, A Bleasal</td>
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<tr>
<td>Sydney, AU</td>
<td>ESA/ANZAN</td>
<td>2021</td>
<td>N Lawn, E Somerville, A Bleasal, J Dunne</td>
</tr>
<tr>
<td>JP</td>
<td>ILAE-AO &amp; ASEPA</td>
<td>06/21</td>
<td>SY Kwan, C Chen</td>
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</table>

### Ongoing Activities

<table>
<thead>
<tr>
<th>City/Country</th>
<th>Organiser(s)</th>
<th>Date (Status)</th>
<th>Persons in Charge</th>
</tr>
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<tbody>
<tr>
<td>LK</td>
<td>Local Chapter &amp; ASEPA</td>
<td>TBC</td>
<td>KP Vinayan, J Wanigasinghe</td>
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<tr>
<td>Manado, ID</td>
<td>Local Chapter &amp; ASEPA</td>
<td>14-15/08/21</td>
<td>KS Lim, Dr. Herlyani</td>
</tr>
<tr>
<td>PK</td>
<td>Local Chapter &amp; ASEPA</td>
<td>TBC</td>
<td>Z Mogal</td>
</tr>
<tr>
<td>CN</td>
<td>CAAE &amp; ASEPA</td>
<td>07/21</td>
<td>WP Liao</td>
</tr>
<tr>
<td>TW</td>
<td>ASEPA</td>
<td>07/21</td>
<td>SY Kwan, C Chen</td>
</tr>
</tbody>
</table>

### Future Plans 21/22

<table>
<thead>
<tr>
<th>City/Country</th>
<th>Organiser(s)</th>
<th>Date (Status)</th>
<th>Persons in Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>CN, VN, BD, PK and more</td>
<td>Local Chapter &amp; ASEPA</td>
<td>TBC</td>
<td>TBC</td>
</tr>
<tr>
<td>MY, KH, VN, BD, LA</td>
<td>Local Chapter &amp; ASEPA</td>
<td>TBC</td>
<td>TBC</td>
</tr>
</tbody>
</table>

He finished by offering help from ASEPA to deliver local education goals and asked Chapters to reach out to him if need be. He invited comments from the attendees.

M Mannan thanked ASEPA and the AO Committee for helping Bangladesh and other developing countries. He gave special mention to CT Tan and SH Lim who assisted at a time when Bangladesh had insufficient resources to grow. It was his wish to see ASEPA strengthen, continue to provide support and ultimately enable the smaller countries to develop further.

S Davis, pointed out that the British Paediatric Epilepsy Training (PET1) courses had not been mentioned in the previous report. These are being run in several countries, most recently in New Zealand (the past week) which was joined by Australia in a face-to-face setting. They hope to run this also in Australia itself. D Chan confirmed that Singapore also ran this PET1 course recently.
E Somerville stated that he has been running his EEG course for 20 years, noting it is now referred to as the ANZAN format EEG course. It has taken place in 11 countries in the region so far. He was concerned whether it would work in an online format, but surprisingly it did and had 120 people in attendance, featuring 25 breakout rooms pre-assigned to 5 students and a tutor. The small group interaction worked well and everyone could leave their microphone on without it being an issue. Pre-recorded 30-minute lectures were played to the plenary room, after which, everyone was automatically sent to their breakout room for a 1-hour tutorial, where EEGs relating to the lecture were displayed and discussed. A static EEG is not very bandwidth intensive so you don’t have to have a terrific internet connection for it to work. He also stated that the summer schools that SY Kwan just presented, plan to be in a similar online group format (for the first time) with a desire to be truly interactive.

H Cross reconfirmed that PET courses are now available online. She noted that New Zealand’s was face-to-face, but the recent one run by Singapore that D Chan previously mentioned, was online and the small group format works very well.

**ILAE-AO Research Task Force, KS Lim (10 mins including discussion)**

KS Lim introduced the Task Force members (KS Lim, A Ikeda, CT Tan, J Qin) and noted that it began in 2018 and will conclude in 2022. The key program of the Task Force is the ILAE–AO Mentor/Mentee Research Program.
- **Objective:** to promote quality research among Asian neurologists, via a match between experienced researchers (mentor) and neurologists in less developed countries (mentee)
- **Mentors:** centres or neurologists with (a) high productivity and (b) willingness to supervise a project
- **Mentee:** Junior neurologists in less developed countries with low research output. Commitment for 1-2 years. The mentor has the right to make final decision on mentee selection
- **Budget approved:** US$1,000 for 4 visits between mentor/mentee
- **Additional activities:** Research methodology course and proposal presentation session

In addition, he presented:
- an HLA project that was run in 2017 with Malaysia, Myanmar and Indonesia
- the Vietnam Epilepsy Surgery Gap group, along with some others in the region, the aim of which was to explore the extent of the ‘gap’ in mainly South East Asian countries
- Epilepsy Research output – referring to a Neurology Asia 2019: 24(2) : 109-119 report entitled ‘Epilepsy Research output in Southeast Asian countries: A systematic review’. The report concluded that while there has been an upward trend in research output in SE Asian countries in recent years, the figures are still very low.
- Epilepsy Genetics Research by MH Tsai from Taiwan referring to recent field papers, one of which was written in collaboration with the Vietnam Paediatric Group.

He moved on to list previous and ongoing projects:
- Perampanel in progressive myoclonic epilepsy and AO-Epilepsy Database, Epi-NET joint registry study supported by Eisai
- Clinical epilepsy genetic study
- Epilepsy genetics in Asia
- EEG services in Asia
- Stigma in epilepsy
- HLA screening for AED hypersensitivity in Asia
- Epilepsy surgery gap in ASEAN countries
- Epilepsy research output in Asia
- Matching of experienced neurologists with younger people e.g. Athira SB (India) and Eishi Asano (JES/Michigan USA)

The AO Epilepsy Database and Epi-NET joint registry allows for information to be collected online from various countries in relation to different proposals. One of these proposals under the AO region is the ‘Perampanel in progressive myoclonic epilepsy’. This is run in collaboration with Kyoto University supported by Eisai and the Epi-Net registry from New Zealand. In addition, it is endorsed by the ILAE-Asia/Oceania Committee. If there are new research proposals, where information can be collected online, Epi-NET can be used as a platform to do so. Chapters were invited to contact KS Lim or A Ikeda who can make the introduction to P Bergin of New Zealand.

Next, he highlighted some activities at the forthcoming AOEC which are planned for the following week:

1. Research sessions featuring mentor/mentees:
   - Two abstracts from Indonesia and Pakistan
   - A mentee presentation, MA Thuy Le
   - A mentor presentation, MH Tsai

2. Roundtable discussions on subjects such as stigma, surgery, paediatrics, pharmacology. He welcomed all to join.

Finally, he invited email queries should anyone need more information kslimum@gmail.com

A Ikeda added that the Epi-Net registry is ready to be utilised and noted that additions to this registry will benefit everyone in the region.

5) 13th AOEC, K Hodgson (5 mins) including AO Outstanding Achievement Epilepsy Award (AOEA)

K Hodgson began by playing a short video showing what the virtual platform will look like for the forthcoming AOEC. It was built by a company called PICO, which has extensive Congress experience and has been used by the ILAE previously for AV and exhibition services. 333 abstracts were submitted for the Congress, which is in line with face-to-face meetings. For oral presentation, 38 were selected, the remaining 275 will be presented as posters. There were only 11 withdrawals. The poster hall will be very interactive. For main Congress Sessions, four will run in parallel; all content is recorded and available online until 9th August.

She noted that there will be a strong focus on networking. In addition to KS Lim’s presentation where he mentioned round table discussions, there will be a ‘Networking Lounge’, a feature of which is ‘business matching’ where delegates can look up a directory of attendees with similar interests. A Social Media wall, chat function and photo booth will also be available. In addition to the exhibition hall, there will be a ‘Global Village’ with a stand from the ILAE. A resource centre will include interviews, podcasts and videos.

D Ding from the Chinese Chapter and A Ikeda/H Shigeto from the Japanese Chapter have
organised an art exhibition which includes 75 pieces of art. Delegates will still receive a Congress bag and are also eligible for a 35% discount on the registration fee for the IEC which is taking place in August. Registrations stand at 900 which is a drop on previous years. She was hoping for a surge in the following days and asked all present to promote the Congress, using some of the tools in the promo email she sent recently.

Finally, she spoke about the AOEA outstanding achievement award and its recipients this year’s AOECC, namely XY Liu, M Mannan, KP Vinayan and Y Mayanagi. Awards are to be presented virtually by J Dunne during the welcome ceremony at the AOEC.

In addition A Ikeda congratulated S Li for receiving the IEC Lifetime Achievement Award, which will be presented this year at the IEC. He also noted that ‘non-member’ registrations currently outnumber ‘member’ registrations and therefore encouraged everyone to promote the AOEC amongst their memberships. SC Li thanked everyone for giving him the Lifetime Achievement Award.

6) 14th AOECC planning, A Ikeda (5min) [document 1*]

A Ikeda presented ‘document 1’ that he had previously disseminated to the Chapters, pertaining to deliberations over the format of the 14th AOECC. He reiterated that at a recent ASEPA meeting on 14th May, the format of the Congress (virtual or hybrid) was uncertain and after the experience of a virtual meeting at 13th AOECC, it would be easier to form a preference for another virtual meeting or a return to a face-to-face Congress. In addition, another problem may be, that too many meetings are planned for 2022, with 6 ILAE regional Congresses looking for a slot throughout the year.

On the 29 May, the AO Committee further discussed the Congress and a consensus was reached that a virtual meeting should be held in 2022, with increased educational content and approaches to engage regional participants. There is no need for a host country. It also needs to provide delegates, especially regional young people, with the opportunity of platform or poster presentation of scientific content, in order to augment their experience at the congress and to augment research activity in ILAE-AO. It was agreed that further opinions would be sought at today’s meeting.

H Cross stated that the pandemic changed Congress delivery for the ILAE and, so far, successful virtual meetings have been held for the North American (Sept 20) and Latin American (Feb 21) regions. The AOEC, next week, will be the third such online meeting followed by a virtual IEC in August of this year. She explained that the Congress Council recognises that needs are different in each region, and as such, a traditional Congress may not be appropriate everywhere. Therefore, other forms of educational content, like courses, are being considered.

With an uncertain future because of the pandemic, the ILAE will not be able to consider face to face meetings for at least another twelve months. The first is planned for July next year for the European region, which has not had a Congress since 2018. Medellin in Colombia is also earmarked as a face-to-face destination for the end of 2022. Sizable deposits were paid to the venues at both of these locations before the pandemic, and the money has been transferred to next year to secure the venues for the Congresses. The possibility of holding hybrid
meetings has been examined and the costs to run them are prohibitive. Therefore, additional meetings for next year will be virtual and at the end of 2021 plans for 2023 will be forged.

KP Vinayan stated that host countries usually bring most attendees to Congresses. He opined that this is the reason the registration numbers are down, because there are no host countries in a web conference.

A Ikeda confirmed that the AO Committee agreed, on 29th May, not to have host countries for web conferences, but that the AO Region and ILAE would be the host. He was aware that India and Korea wanted to host the next AOEC, but if they host online, they will lose the opportunity to host at the next face-to-face meeting. He agreed that the lack of host country registrations is a cause for concern for web conferences.

7) ILAE-AO Activities and Reports

Budget, SB Hong, Treasurer, CAOA (5 mins including discussion)

A Ikeda spoke for this item and stated that there has been little expenditure over the past 18 months. A budget meeting is planned in the latter half of 2021, at which time plans will be made for the Surgery TF to prepare the database.

Fellowship Training opportunities, CT Tan, (5 mins including discussion)

CT Tan stated that their main activities are to organise Fellowships of 3 months to a year within the region. The sponsors of the Fellowships are:

i. ILAE through the AO Committee and ASPEA
ii. The Japan Epilepsy Research Foundation
iii. The Australian Epilepsy Society
iv. Korean Epilepsy Society

Last year, because of COVID-19, only two Fellows completed their Fellowships. One was from Indonesia who worked with M Tripathi in Delhi. The other was from Bangladesh who did his training with KS Lim.

Advertisements were not issued for 2021 as Fellowships are not practical in the current climate. It is difficult to travel and also for the host to take Fellows. In addition, there are too many changes in how doctors can see/treat patients. For the coming year there are two places available at the Japan Epilepsy Research Foundation. However, it is still not certain if they can proceed. As such, no advertising has yet begun.

A Ikeda added that in the Japan Neurology Society, virtual training was launched in February. There was only one applicant and he opined that perhaps potential candidates are too busy to attend. Nevertheless, there may be an opportunity to conduct some kind of Fellowship training online.

Information Officer Report, D Chan (5 mins including discussion)

D Chan reminded Chapters that he sent out an email to ask for updates to their webpages. Links to each Chapter’s page will be posted on the AOEC platform. He therefore urged Chapters to ensure the data is up to date. He also informed everyone that the ILAE has posted ‘COVID-19 and Epilepsy’ resources with FAQs on its website in several languages. He encouraged all present to volunteer to translate their language. This could be a great resource
for everyone’s patients. Anyone wishing to volunteer can email him at derrick.chan.w.s@singhealth.com.sg

Paediatric Task Force, A Visudtibhan (5 mins including discussion)
A Visudtibhan could not attend

Epilepsy Surgery Task Force, PS Chandra/K Kawai (5 mins including discussion)
K Kawai began by stating that this Task Force started in 2018 and its objective is to promote the development and utilisation of epilepsy surgery in the region, since it remains remarkably underutilised. From the start there has been a good collaboration with the Asian Epilepsy Surgery Congress which is a well-established event. At an AESC board meeting in 2018, K Kawai informed the committee about the AO Surgery Task Force, which was well received and an agreement was made to promote co-operation in the following areas:
- Treatment gap in Epilepsy Surgery
- Educational seminars in countries where resources are limited
- Build up an epilepsy surgery database

In 2019, at another board meeting in Kobe, further co-operation was discussed. K Kawai presented on ‘Epilepsy Surgery in Asia, Current Status and Our Task’ on behalf of ILAE-Asia/Oceania. An invitation to attend this meeting was extended to HY Yu from Taiwan, A Ikeda from Japan and SB Hong from Korea. An agreement was made to invite more neurologists and paediatricians to the AESC.

The TFs activities, some of which have been stalled by the pandemic are as follows:
1. Seminars in countries where resources are limited.
   a. 2019 – Bhutan, Nepal with SP Chandra
   b. 2019 – Mongolia with K Kawai
2. Survey on the current status (stalled)
3. Build up an epilepsy surgery database (stalled)

In 2019 an Epilepsy Surgery Workshop was held in Ulaanbaatar on 16 October. Topics were:
   i. Patients who are most suitable for epilepsy surgery (Y Inoue)
   ii. How to start an epilepsy surgery program (Muttaqin Z)
   iii. Basic surgical procedures for epilepsy (K Kawai)

The status of Epilepsy Surgery in Mongolia at that time was as follows:
- No information thus far
- Presently no cases of epilepsy surgery
- Presently they send patients abroad for surgery
- Approximately 30 cases of temporal lobectomy in the 1990s
- There are several epileptologists
- Poor relationship between epileptologists and neurosurgeons
- Neurosurgeons say they do not know how to start

One attendee, a functional neurosurgeon, stated that after the workshop he felt he could start.

K Kawai next announced that the following week, at the AOEC, on 13th June at 10am Japan time, there would be an Epilepsy Surgery Task Force Session entitled ‘Can we reduce the treatment gap in epilepsy surgery?’
PS Chandra presented a proposal for a webinar series on ‘Epilepsy Surgery Case by Case’ which is planned for 1st July. This has been developed as an alternative during the pandemic for younger faculty which had noted that when it attended large congresses, it cannot understand how to deal with individual cases. Therefore, cases being presented one by one with follow up discussions, makes it feel comfortable.

Based on this input, it was thought to be highly beneficial to create this epilepsy surgical series as webinars. It has been based on previous experience in India where such courses have been delivered already for one year with almost 1000 attendees. Funding has been obtained from Sunpharma, MEG, AIIMS and NBRC. The format will be 1-2 cases to be presented; surgical strategies will be discussed with the faculty and results presented for that case. Finally, how the case was managed will be shown. PS Chandra has access to 400 cases from which to draw. Cases will be straightforward rather than complicated, which is more appropriate for the younger faculty looking to start their careers in this area.

K Kawai asked HY Yu and A Tovudoorj to speak about the TF. HY Yu thanked everyone for promoting surgery in the region and that she and her members fully support the proposed activities. Their next annual meeting will take place in December in a hybrid format. A Tovudoorj thanked the Epilepsy Surgery TF for the successful course that was run in Mongolia. A Ikeda offered his support to the proposed webinar series and remarked how impressed he was when he attended SP Chandra’s aforementioned webinar. S Wiebe added that he too had attended and was also impressed by the high numbers from a very large geographic area. He offered his congratulations and opined that it was a great initiative.

Global Outreach Task Force, E Somerville (5 mins including discussion)
E Somerville stated that at next week’s AOEC there will be a Global Outreach Session with three talks.
  i. What are the main factors preventing treatment of epilepsy?
  ii. New anti-seizure drugs in resource limited areas: who should have access to them and which ones?
  iii. Epilepsy treatment without investigations: how much do tests add?
In addition, there will be a number of other sessions covering topics that fall under this TF’s umbrella.
  - Scope of Care (Chairman’s Symposium)
  - Epilepsy Care in low and middle income countries.
He explained that the activities in the last few years have been aimed at training in primary care, diagnosis and treatment of PWE. The small group, case-based interactive sessions have enabled this and have taken place in Indonesia, Malaysia and Vietnam mainly so far. There are overlaps with ASEPA activities which have similar goals and often the same speakers. The differences are that this is aimed at primary care rather than neurologists and epileptologists. The courses that SY Kwan spoke about will be part of the TF’s activities in Indonesia and India/Sri Lanka.

A Ikeda, reminded everyone that the relationship with the regional WHO office is quite important in working with the Global Outreach Task Force. He then called on E Bertram to speak and thanked him for attending at such a late hour on the east coast of the USA.
E Bertram stated how impressed he is by the activities in the region. In particular, he was pleased by the last report from E Somerville relating to the Global Outreach and Primary Care initiatives which he opined will be a very important part of the ILAE’s future.

CT Tan commented that E Somerville’s activities are very strategic. The coming training school will be placed in Manado (Indonesia), close to many islands that are experiencing a high treatment gap. This is a strategic location that was chosen, not least because there is a medical school in Manado for training of specialists. He congratulated E Somerville for this project.

BI Lee stated that in the Philippines, the Epilepsy Manager’s program has been halted because of the pandemic. In a situation like this, the small group, online education program has an important place in the Asian/Oceanian activities. He hoped that ASEPA and ILAE-Asia/Oceania can effectively educate the primary healthcare workers in high treatment gap areas.

8) Other Issues and general discussion (25 mins)

• A Catur thanked CT Tan for his activities in Indonesia.
• J Wanigasinghe conveyed her thanks for the selection of Sri Lanka as a potential place for a virtual ASEPA workshop. She expressed her desire for a speedy return to face-to-face meetings. A Ikeda agreed, but also stated that in this region there is a 6.5 hour time span, and therefore therefore locally oriented web conferences are very important.
• SP Ojha stated that in Nepal there is a high treatment gap. At the same time there is a new faculty training in Epilepsy Surgery, and in general neurology. At the end of the pandemic these individuals will be eager to be part of AO activities be they face-to-face or online.
• A Ikeda asked SP Chandra about his online events over the past year and if any recorded material was available. SP Chandra wasn’t sure, but stated that the new ‘Case-by-case’ webinar series starting on 1 July will be recorded.
• S Davis conveyed her thanks to H Cross for getting up so early and staying on the call. New Zealand is the most Eastern country in the region. There are many webinars that she would like to attend but they are too early. Therefore, she re-emphasised the importance of recorded material.
• P Kawai asked SP Chandra how he will disseminate the information about the new webinars. He replied that they have a mailing list of 7000 people. They will request a post on the ILAE-AO website in addition to a mail shot from K Hodgson. They will also record.
• K Kawai stated that the Epilepsy Surgery Technical Meeting, a satellite meeting of the European Epilepsy Congress, are run on a monthly basis. He will make enquiries with the organiser (A Cukiert) for recorded material.
• S Wiebe noted that there will be a full day on Epilepsy Surgery on the last day at the IEC in August.
• A Ikeda asked for the YES representative MF Shaikh to speak. MF Shaikh thanked A Ikeda for inviting him to the meeting and remarked how happy he is that the region is getting young people involved. He also thanked the committee for the reduced registration fees for younger members.
• A Ikeda thanked E Bertram, S Wiebe and H Cross for their support. S Wiebe thanked A Ikeda for his hard work during his term as Chair of the region over the previous 4 years.
• Finally A Ikeda asked all Chapters to encourage their members to attend the AOEC next week and closed the meeting.
Discussion for 14AOEC meeting planning.  Date: October 28, 2020 10pm (Japan time)
 Attendees: A Ikeda, J Dunne, SH Lim, D Ding, K Hodgson, D McEvoy, S Wiebe, H Cross

Dear All,

Based on the doodle responses so far, everyone can do Wednesday 28th October for a 13th AOEC call so please keep that day free at the local time indicated below until Sam and John hopefully advise if they can join too and then I’ll send out the zoom link with an exact time within the two hour period:
Sam: 07:00-09:00
Helen, Denis and I: 13:00-15:00
Ding, John and Shih Hui: 21:00-23:00
Akio: 22:00-00:00

Kind regards,
Kathryn

At the time of IEC at Bangkok meeting (6/2019), among 2 chapters (Korea, India) which wanted to hold 14AOEC, one of them was most likely to be selected, but it was not finally decided. Once COVID19 pandemic occurred in early 2020, 13AOEC (Oct 10-13, 2020) has been discussed to be postponed or not, and finally it was decided to be postponed in June 2021, and complete virtual meeting was planned in June 10-13.

There was a big uncertainty as to how soon face-face meeting will be held and only web meeting will be possible. ILAE respects the discussion of each region before the final decision

2) Opinions from attendees for 14AOEC

It should be web-conference, since we could not expect the solution of COVID 19. Hybrid conference is unlikely since it would cost so much, and ILAE council meeting could not provide the better answer now either. Since the situation has changed significantly after COVID19 pandemic, we may again call for the nomination for 14AOEC. OR before that, we may ask the 2 chapters who already nominated as to whether they still want to host 14AOEC or not.

If virtual conference is planned, not only one chapter but 2 chapters could host 14AOEC together, and even small chapter may have the chance to host or co-host 14 AOEC.

We could get the opinion from CAOA committee member, and then ask chapters opinion, not as free answer, but choices from several proposals.

(It is the end of discussion on October 28)

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Follow up information

1) Latest information from ILAE
ILAC recommends that IEC will be held in 2021 and 2023, and 6 regional meetings will be held in 2022, and discussion of each region is desirable.

2) Summary until May14, 2021 (SEPA business meeting by Akio IKEDA)
We still could not expect the appropriate meeting style, i.e., face to face meeting, virtual or hybrid. It may not be possible to have 6 regional meeting in 2022, or between 2 consecutive IEC meeting year, (unless each meeting should be smaller than previous face to face meeting).
We still have not experienced a new style of 13AOEC, and thus once we would organize and complete 13AOEC, we may have and reach to better solution and then consensus.
3) Tentative Summary, May 29, 2021 (ILAE-AO committee/ASEPA business meeting)
There were so many and constructive opinions and discussion. A Ikeda summarized our consensus that a virtual congress should be held in 2022, with increased educational content and approaches to engage regional participants, and that there is no need for a host country. It also needs to provide delegates especially regional young people with the opportunity of platform or poster presentation of scientific content in order to augment their experience at congress and to augment research activity in ILAE-AO. The further opinion is welcome and it will be discussed in the coming chapter convention this month.