Welcome to this, the Spring 2006 issue of Epigraph. The issue is being circulated mainly in the conference bags of the 2006 regional ILAE conferences and has a different purpose from the three 2006 online issues of Epigraph. The online issues are sent by e-mail to all ILAE members and have a newsletter function and format — and on page 10 there is an article which provides more details on this new ILAE initiative. In contrast, this print edition is intended primarily to an overview of the ILAE and some of its activities. Although hopefully all ILAE members will learn something from the issue, it is designed particularly for new members, and also for the non-members, attending the ILAE conferences, and for those who have not had much contact with the ILAE before.

ILAE is an organisation which was founded in 1909 and which has in recent years progressively grown in size and in the range of its activities. There are now 96 chapters and over 15,000 members around the world. The purpose and structure of the ILAE and details of some of the ILAE activities are featured on different pages of this issue. I have included an ILAE ‘primer’ and articles on its national chapters, the composition of the Executive Committee and commissions and TaskForces, the Global Campaign, the ILAE regional and international conferences, the ILAE website, the online newsletter Epigraph and the ILAE’s scientific journal Epilepsia. The most important new initiative of the ILAE is to promote epilepsy education — and Peter Wolf, ILAE President’s Message

Greetings

As of the last evening of August 2005, a new team of ambassadors has taken charge of the affairs of the International League Against Epilepsy (ILAE). The current Executive Committee combines the aspects of experience and innovation. In addition to the Past President, Giuliano Avanzini, who has the constitutional role of guaranteeing continuity, two of the elected officers, Second Vice President Fred Andermann and Treasurer Martin Brodie, have served on the previous Executive Committee (EC). Personally I was not on the past Executive, but know the ILAE administration well from my time as Secretary General (1993-2001). Two new people in the group, Emilio Perucca and Nico Moshé have taken responsibility as First Vice President and Secretary General, respectively. Simon Shorvon continues as Information Officer, and he and Phil Schwartzkoen were elected as the new joint Editors-in-Chief of Epilepsia on the retirement of Bob Fisher in Dec 2005.

With the Executive Committee in place, we have already been hard at work for the League. One of my two main focuses for my presidency is on education, which is the clue for any development. The ambition with this priority is no less and no more than the implementation of an educational system in the field of epilepsy which is the best and unparalleled by any other field of medicine. Is this obtainable at all? Yes, it is, and we are even well advanced on our way to get it achieved. Not only do we already have multiple educational activities, we are also well under way to put them into a system. The components are:

- An “educational network” of centres and institutions offering on-site training in parts of the curriculum.
- Specific educational conferences for the primary and secondary levels of health care, especially in countries with little developed specialisation.
- Special educational activities for professionals allied with medicine (PAM).

There is quite a positive echo to education being a priority, and people have expressed their interest in participating in the “Faculty of 500”. This is one of the issues for which it is important to have the International Academy in place as soon as possible because the Faculty.

Continued on page 2

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ILL THEREAUGIENDA FOR

EPILEPSY

ESTABLISHED 1909

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In Helsinki, the first distance education course on EEG in epilepsy will be launched. It is designed as the first of two sequential courses (basic and advanced) and basic training in EEG is requested for participation. This is expected to be the last distance education course which is developed by EUREPA and out of Europe, with financial support of the CEA. International task forces will be established for the development of other courses, with Imaging in Epilepsy and Clinical Pharmacology of AEDs as the next topics to be addressed.

The Regions

More changes, however, are ahead: Paradoxically as it seems, the expansion of the ILAE to now almost 100 Chapters, has had the consequence that fewer and fewer regions are represented on the Executive. The EC from 1997-2001 had officers from Asia, Europe, Latin America and North America, the last EC had no Asian member, and now we have come to a mere European / North American Executive. The reason probably is twofold: that Europe is the largest region, with about 40% of all chapters, including many relatively large chapters and therefore representing the majority of votes; and that our internal communication is not yet good enough to ensure global perception of all important contributions to our progress, especially those of primarily regional character, contributions which would most probably be reflected in the outcome of the elections if they were better known.

I am pleased that it was a European Chapter that proposed an amendment of our constitution which was accepted with broad agreement, to open the EC up for at least those regions who are fully operative, to elect an additional Vice President in case they have nobody on the EC. The “Danish Amendment” is an expression of a strong spirit of worldwide friendship, mutual respect and global commitment which we all in the ILAE have reason to be proud of. The wording of the amendment makes it clear that we will not be moving from a global organisation, with a central administration interacting with the chapters, to a multiregional network. But the experiences and wisdom created in the regions by their commissions will be integrated to enrich and improve our global agenda.

The new EC, during its first meeting on September 1, has already defined criteria to consider a region as “fully operative”, and these have been brought to the attention of the regions who right now are not present on the EC and may get the right to vote for an additional Vice President.

Global Campaign

The end-of-term reports of all outgoing Commissions but Epidemiology have meantime been received, some rather late, and several of them required correspondence with the outgoing Chairs which is not terminated in all instances. The North American Commission and Classification and Terminology are in place. One typical situation is that subcommissions and working groups have not terminated ongoing activities, and I would like to consult with the EC the best way of dealing with this. My proposal is to give these groups deadlines to finish their business as “task forces”, and thereafter consider them dissolved.

The old Commission on Asian and Oceanian Affairs is still conducting the business of the region as the new Commission can only be finalized after the elections of the additional Vice President from that region have been accomplished. Nonetheless, they have produced a report for this meeting which documents their ongoing activity, especially in the field of education.

I have tried to keep a helpful eye on the transition of the Global Campaign Management, where the involvement of the regions is not yet satisfactory. Thanks to the activities of Giuliano Avanzini, Phil Lee and Hanneke de Boer, the agreement with the WHO re the consultant status of Dr. Prilipko seems now to be satisfactory.

Meetings of the SAC and IOC for the congresses in Helsinki and Singapore, respectively, showed good progress with both. For the Guatemala congress, a brainstorm for the development of the Caribbean is being planned on September 9, 2006, and I am inviting participants from the territories around the Gulf of Mexico. This is an ILAE initiative as a regional contribution to the GCAE and on the background of our priorities. We have a lot to do over the next four years and the involvement of our membership will be a key ingredient to the success of the League and its pursuits.

President’s Message

(continued from page 1)
THE INTERNATIONAL LEAGUE AGAINST EPILEPSY (ILAE) – a primer.

The ILAE is an international non-profit organization registered in the United States, and is the premiere international professional association of physicians and other health professionals in the field of epilepsy. It was founded in 1909 and has grown in size and influence in recent years. From its earliest years, it has been organized into national chapters and currently there are chapters in 95 countries and over 15,000 members worldwide.

The mission of the ILAE is to work towards a world where no persons’ life is limited by Epilepsy. It mission is to provide the highest quality of care and well-being for those afflicted with the condition and other related seizure disorders.

Over the years, ILAE has grown in complexity and size, and now seems a good time briefly to lay out its structure and component parts. For more details, readers can consult the ILAE Website at www.ilae.org.

EXECUTIVE COMMITTEE

The ILAE is overseen by an Executive committee, currently of eleven persons (current members in brackets). The President (Peter Wolf) is elected by a ballot of national chapters for a 4 year term. The Secretary General (S Moshe), Treasurer (M Brodie) and two Vice Presidents (E Perucca and F Andermann) are also elected by a ballot of national chapters for a 4 year term. The Information officer (S Shorvon) and the Editors-in-Chief of EPILEPSIA (P Schwartzkroin, S Shorvon) are appointed by the President and the Executive Committee. The past president (G Avanzini) serves for a four term. The present President (S Lund), Secretary General (E Hargis) and Treasurer (M Glynne) of the sister organisation, the International Bureau Against Epilepsy (IBE), are ex-officio members of the Executive Committee. In the future, there will be representatives from some regions also elected onto the Executive Committee.

CONSTITUTION AND BYLAWS

The ILAE is governed by a written constitution and bylaws, and these are posted on the ILAE Website. The constitution has sixteen articles, and the bylaws has fourteen sections, and these cover the objectives, membership, governance and the range of the ILAE activities and its structure. The Constitution can be amended at the General Assembly of the ILAE.

NATIONAL CHAPTERS

Each national chapter has its own constitution and bylaws and its own president and officers, elected by individual members of each chapter. The constitutional and leadership arrangements vary from chapter to chapter, within stipulations defined in the ILAE constitution, as do the details of membership eligibility, but generally speaking membership is open to any doctor and health professional interested in epilepsy.

There are currently 95 CHECK chapters in the ILAE, which is the greatest number in its history. The largest is the American chapter with XXX members, and the smallest is XXX with XXX members. The role of the national chapters is generally to establish and maintain good communication between persons active in the field of epilepsy, promote publications in the field of epilepsy, organise or sponsor national meetings, appoint commissions or individuals for specific problems, develop or apply other methods for the furtherance of the objectives of the ILAE.

REGIONAL BODIES

ILAE is also divided into 6 regions (North America, South America, Europe, Eastern Mediterranean, Asia and Oceania, Africa). Each region is made up of a grouping of national chapters (the largest is Europe with 46 chapters and the smallest is North America with 3 national chapters CHECK FIGURES). Fully developed regions each have a ‘Regional Commission’ and a ‘Regional Council’, and regional scientific conferences are held every two years. Active regions also conduct research and education and have a role in influencing public policy in epilepsy at a regional level. The currently constituted regional commissions are: European Commission (Chair M Baulac), Asian and Oceanian Commission (Chair — SH Lim), North American Commission (Chair – J Noebels), Latin American Commission (Chair – J Moctezuma), Eastern Mediterranean Commission (Chair – B Yaoup).

ILAE COMMISSIONS AND TASKFORCES

In every 4 year term, the President and the Executive Committee appoint Commissions and Taskforces, to carry out work for the ILAE. These bodies involve individual members trans-nationally. Currently, the following topic-related commissions and taskforces are constituted: Constitutional Taskforce (Chair G Avanzini), Classification Taskforce (Chair – A Berg), Website Taskforce (Chair — S Shorvon), Neurobiology commission (Chair — A Vezzani), Pediatrics commission (Chair — H Cross), Therapeutics Strategy commission (Chair tbc), Psychobiology commission (Chair – P Genton), Epidemiology commission (tbc), Genetics commission (tbc), Commission on the Development of Epilepsy Care (Chair — G Avanzini).

ADMINISTRATIVE OFFICES

The ILAE has two administrative offices. The financial office is in Hartford and the ILAE HQ is in Brussels. The Hartford office oversees the administration and is lead by Mr Peter Berry. There is XX staff employed in the service of ILAE at these two offices (Peter Berry Administrative Director, Delphine Sartieux (Assistant Administrative Director), Donna Cunard (Finance Director), Christer Osterling (Website Project manager), Nele Delvorder (Membership Services).

ILAE CONFERENCES AND THE OFFICE OF THE IDM

ILAE holds a global scientific conference once every 2 years (Epilepsy International Congress). Each region holds a regional scientific conference every 2 years, in the years when there is no global conference, and every national chapter holds a national scientific conference every year. At the national conferences, the chapters also hold their Annual General Meetings, and at the International Congresses, the ILAE also holds its General Assembly of all its national chapters. The regional and international conferences of the ILAE are organised by its own conference organiser (Richard Homes, International Director of Meetings) and his office.

GLOBAL CAMPAIGN

This is a joint ILAE, IBE and WHO initiative, launched in 1997. The first phase of the Global Campaign Against Epilepsy was launched was devoted primarily to increasing public and professional awareness of epilepsy as a universal treatable brain disorder, and raising epilepsy to a new plane of acceptability in the public domain. The second phase of the Global Campaign Against Epilepsy was launched in 2001 and is devoted primarily to activities that promote public and professional education about epilepsy; identify the needs of people with epilepsy on a national and regional basis, and encourage governments and departments of health to address the needs of people with epilepsy.

EPILEPSIA

EPILEPSIA is the scientific journal of the ILAE and the leading journal in the field of epilepsy. It is published by Blackwell and edited by an Editor-in-Chief (or as currently two joint Editors-in-Chief, P Schwartzkroin, S Shorvon) who appoint also an editorial board and associate editors. EPILEPSIA was started in 1909, and currently is published on a monthly basis. It has an annual turnover of $1.4 dollars, a subscription base of 10649 (consortia, individual and institutional), and in 2005 399,814 articles were downloaded from its online hosts.

ILAE WEBSITE AND EPIGRAPH

Ten years ago, the ILAE launched its own newsletter EPIGRAPH, to be sent individually to all individual members. This was initially sent out 2-3 times a year, but from 2006 4 issues are year will be published — 3 online and one in a print edition. The first online edition in 2006 was mailed to 10,587 persons). The newsletter is designed to facilitate communication of ILAE news from the central bodies to individual members in each country. 4 years ago, ILAE also launched a website (www.epilepsy.org). [ OR PRIMARY NAME]. This has grown in size and complexity and in 2005 there were 249,911 visits. EPIGRAPH and the Website are overseen by the ILAE Information Officer and Website Taskforce.

ILAE FINANCES

ILAE finances are overseen by the Honorary Treasurer (M Brodie), with the assistance of the Finance Office, who reports to the Executive Committee on financial matters. The income is derived from the dues of national chapters, sponsorship, income from EPILEPSIA, income from conferences, and investment income. In the current fiscal year, ILAE budgeted annual income is $2,124,040, expenses are $1,023,282, and assets $9,346,034. Membership of the Executive Committee, regional bodies, commissions and taskforces is honorary and members are unpaid for this work.
On 31st December 2005, Robert S. Fisher stepped down as Editor-in-Chief of Epilepsia. Dr. Fisher has helped guide Epilepsia to a prominent position as one of the elite neurological journals, and the academic epilepsy community owes him much gratitude for his erudite and effective leadership. As the official journal of ILAE, Epilepsia reflects the extraordinary breadth of the epilepsy research community, as well as its geographical diversity. These are features that we, the new editors, hope to maintain and further expand.

Epilepsia’s priority will remain the publication of high quality science that contributes to our knowledge about and treatment of, epilepsy. As new editors, Simon Shorvon and I invite submissions from all parts of the world, covering all aspects of epilepsy investigation. We are committed to the broad dissemination of epilepsy information and provocative discussion. These goals will be met via high quality peer review, rapid turn-around time, and expedited processing of articles of particular import and interest. The Journal will be dedicated, first and foremost, to the publication of original research papers in clinical and basic science aspects of epilepsy. In addition, Epilepsia will feature reviews on topical issues, as well as editorial commentary that stimulates discussion and debate. As the journal of ILAE, Epilepsia will feature general interest reports from ILAE Commissions. Reports from epilepsy-relevant conferences and workshops will also contribute to the educational mission of the Journal. As in the past, the Epilepsia supplements will provide “added value” to the Journal subscription.

While the position of Epilepsia seems tranquil and secure, it is increasingly apparent to Simon Shorvon and me as incoming editors that the general landscape of academic publishing is changing rapidly. The development of internet technology has provoked vigorous discussion about open-access publishing and led to many issues — scientific, political, and financial — regarding traditional methods of print publication. Epilepsia will, inevitably, change in response to these pressures. It is our job as editors to make these changes proactively, with thoughtful deliberation and input from the Journal’s readership. Change and innovation will be carried out within the context of our mission - to maintain the highest scientific standards for the Journal, and to make epilepsy knowledge widely available to the international epilepsy community. Epilepsia plays a special role in the epilepsy academic community. Our goal is to maintain Epilepsia as the premier journal for clinical epilepsy papers, as well as for basic science research in particular areas of translational neuroscience. Epilepsia should be the first choice journal — for epilepsy specialists as well as for biomedical researchers in related disciplines — as a source of leading-edge information in the field. Through the efforts of the professionals that use the Journal, Epilepsia can become an active player in the advancement of epilepsy research and treatment. We are grateful for the opportunity to lead these efforts, and look forward to broad participation from you, our colleagues.
ILAE Launches Its Newsletter in a New Online Format

By Simon Shorvon, Editor of Epigraph and ILAE Information Officer

Epigraph—the newsletter of the International League Against Epilepsy—was launched in 1994. It was a novel concept for the league, and— for the first time in the League’s history—Epigraph provided a conduit for the transmission of ILAE information from the ILAE centre to its chapter members around the world. It struck a chord and in the past 10 years has continued with 2-3 editions a year and has retained throughout this period the same format, distribution method and the same editorial approach. Time, though, moves on, and in the past decade the rapid rise of online communication has rendered paper newsletters somewhat redundant. Furthermore, in the past four years, the ILAE Website (www.ilae-epilepsy.org) has been developed to the extent that it has become the primary source of information about the ILAE. Epigraph had, in the view of some, become rather tired in format and content, and certainly its distribution lists had become progressively out of date.

At a meeting of the ILAE Website Task Force in October, therefore, the relative roles of Epigraph and www.ilae-epilepsy.org were debated and a number of decisions were made. It was decided to retain Epigraph, as it was felt that ILAE continued to need a mechanism to communicate directly with its members—and Epigraph meets this need. However, we also recognized that the mailing of a print edition was wasteful of expense and that a far more efficient method would be via email. A decision was therefore made to convert Epigraph to become an essentially on-line newsletter, with its format changed accordingly and also to link Epigraph to the website far more closely.

The publishing plan is as follows. Epigraph will now come out in three online issues each year (winter, summer and autumn), with a single additional print edition published in the spring for inclusion in conference bags of the ILAE regional and international conferences. The three online issues will be emailed to members at their individual addresses, thereby cutting out postal and production costs, and the vagaries of the postal systems.

What you see on your email is largely an annotated index with links to articles and information on the ILAE website. The small size of the email will allow rapid opening and the reader can choose quickly what to read. Simply clicking on the links will lead to the relevant page on the website. Epigraph (via its Website links) will contain, as before, ILAE news, articles and information about ILAE activities and conferences, and links to its publications and administration. A new regular feature—Episcope, A Historical Note, will be included in each online edition. Occasional longer feature articles on topics related to epilepsy will be included.

As before, readers are welcome to submit articles at any time for consideration for publication in Epigraph, and we hope that these changes will enhance communication from ILAE for the benefit of all its members.

Episcope, A Historical Note

Episcope, A Historical Note, is a new feature which will appear in each issue of Epigraph online. Each article will feature a paper of historical interest published in Epilepsia since its inception in 1909. The Episcope feature aims to provide a brief context to the article and its author, and will be linked (by a simple click of a mouse) to the full text of the paper which is freely accessible online. In this way, we hope to encourage readers to read the original papers, and to learn more about the contribution of ILAE to epilepsy.
documents have now been copied into the EIC. Almost all of the videos held in Zurich. This database is searchable and is now complete. It is a new initiative launched in February 2006 and is described further on page XX of this newsletter. Amongst the entries are: commission and task forces, executive committee, structures and personnel.

The site continues to develop. There are new pages which are currently in the process of development, and other sections in the planning stage. Currently, the site comprises the following sections:

Home Page
- The home page has been designed to show highlights and topical features and includes links to various other ILAE activities (Global campaign, conferences, EIC, EPILEPSIA etc.). Details of the recent election have also been posted.

About the ILAE
This area contains documentary information about the central ILAE structures and personnel.
- Information about the ILAE executive committee
- Information about ILAE commissions and task forces
  - ILAE constitution and bylaws
  - ILAE strategic plan
  - Historical details.

ILAE Resource Central
This area contains information about EPIGRAPH. Amongst the entries are:
- Discussion group – this is a new initiative launched in February 2006 and is described further on page XX of this issue of EPIGRAPH
- ILAE Worldwide Resource Directory. This is now complete. It is a searchable database of the EIC collection of 1500 epilepsy-related publications and videos held in Zurich. This database is updated regularly in collaboration with the EIC. Almost all of the videos and documents have now been copied into digital format. One of the videos is available for on-line ordering as a trial run.
- A section of 10 brochures about epilepsy have been copied and put on-line, some of the brochures have been translated into four languages. It is planned to post further selected items, eventually to have 50-100 documents on the site.
- An International AED Database, compiled by Bob Fisher, is posted which allows members to view a comprehensive list of antiepileptic drugs (with generic and proprietary names) that are available around the world. The database can be searched by brand name, generic name and/or which country certain medications can be found.
- The proposals of the ILAE task force on classification and terminology.
- Details of future ILAE congresses and meetings with links to relevant websites and in some cases with on-line registration.
- Global campaign section presents details of the ILAE/WHO/IBE global campaign, and links to the WHO website.
- ILAE reports section which contains copies of various current ILAE reports.
- ILAE annual report section contains the current annual report. "Hot topics" section has been inaugurated and commissions for new articles in place. This section aims to provide a short authoritative summary of clinical topics with links to recent EPILEPSIA papers. Links section has been inaugurated and provides links (via a click on the mouse) to other professional organizations (list is in process of compilation).
- Selected scientific articles. This section contains a searchable selection (by the Information Officer) of important papers on epilepsy published each month (about 10 articles each month).

Chapter section

This area contains information about ILAE chapters worldwide.
- Details of ILAE national chapter and their officers and council members. There are links to the chapter website (where available) and email contact details.
- The annual reports of individual chapter are also posted where these are available.
- Map showing geographic location of each chapter, with a clickable search facility.

Publications section
This area contains information about ILAE publications.
- The current editions of EPIGRAPH.
- Information about EPILEPSIA and links to the journal website.
- A subscription area for discounted subscriptions for ILAE members for EPILEPSIA and four other epilepsy journals.
- Annual report.

Archive section
This area contains archived copies of recent ILAE documents.
- Non current copies of EPIGRAPH (from 1999).
- The "Awards section" includes details of ILAE awards and the recipients, since 1999, of the following awards: ambassador, lifetime achievement, Michael prize, social achievement, young investigators award.

Contact details
Details of the Brussels and Hartford Offices and personnel.

The editorship of EPILEPSIA and of EPIGRAPH is also unpaid. Staff in the two administrative offices and the IDM office are salaried. The annual dues of each chapter to ILAE are $10 per year per member, except for countries with low GDPs (World Bank categories ‘Low’ and ‘Lower Middle’) for whom membership is supported by a solidarity fund.
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and efficient than telephone calls and has
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The case of Zhu Ling demonstrated for the
diagnosis and treatment was initiated.
student, Zhu Ling may have had access to
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which suggested the rare condition of
Cai Quanqing, a friend of Zhu Ling's, sent
physicians could not arrive at a diagnosis.
and ultimately fell into a coma. Her
medicines. Three months later she
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Peking University in mainland China who
starkly highlighted by the case of Zhu
internet to the practice of medicine were
research or related topic.
A "consultation" from physicians around the
world describing her condition with a desperate
emails to doctors around the world
to exchange views and comments and to
post queries on any epilepsy clinical,
any epilepsy clinical, research or related topic.
In 1994, the potential benefits of the
internet to the practice of medicine were
starkly highlighted by the case of Zhu Ling, a 21 year old chemistry student at
Peking University in mainland China who
became sick with a mysterious illness (1). She developed abdominal pain and her
hair fell out, but then recovered after treatment with traditional Chinese
medicines. Three months later she
deteriorated, developed facial paralysis
and ultimately fell into a coma. Her
physicians could not arrive at a diagnosis.
Cai Quanqing, a friend of Zhu Ling’s, sent
e-mails to doctors around the world
who had access to thallium. Laboratory testing confirmed the
diagnosis and treatment was initiated.
The case of Zhu Ling demonstrated for the
first time to millions of people the amazing
role the internet could play in the practice
of medicine. Anyone with a computer and
internet access could now obtain a
"consultation" from physicians around the
world.
Since Zhu Ling, more and more
medical care depends upon internet
communication. Lab results, x-ray images,
and even EEG data can be relayed by the
internet. Email communication is relied
upon heavily by researchers and
academicians and has begun to penetrate
physicians’ clinical practices as well. Many
doctors have found that patient
communication by email is more focused
and efficient than telephone calls and has
the advantage of creating a paper trail to
document the interchange.
To further harness the advantages of
the internet for its members, the ILAE
website task force examined the pros and
cons of different types of internet-based
communication. Online 'chats' allow one
or more people to communicate back and
forth in real time. Chats can even be
performed with video. However, 'chats'
have limited application to an
international group like ILAE because of
the difference in time zones of its members
and the difficult logistics of having
everyone participate at the same time.
Another type of
internet communication tool is a 'weblog' or
'blog' where daily entries are posted,
usually by one
person or a noncommercial
organization. Blogs
may contain links to
other websites and
other subjects, and
may also resemble
personal online
journals.
After much
deliberation, the
website task force
selected the format of
a "discussion group", also known as a "forum",
"bulletin board", or 'list-serve', where
members initiate or respond to topics by
email and their responses are posted
sequentially. Discussion groups have
become very popular for many topics.
Members may be notified of updates to
the discussion by an email from the group
administrator and can check the
discussion's progress by logging on to a
designated website. Discussion groups may
or may not be moderated for content and
behavior.
The ILAE has members in nearly 100
countries crossing many time zones.
This internet-based discussion group, available
24 hours a day and 7 days a week, will
provide an easy mechanism to facilitate
communication between members on topics
ranging from clinical research to patient
care. Conversations between members that
begin at the annual International Epilepsy
Congress and regional meetings
can be easily extended throughout the
year via this discussion forum.
To ensure the professional
nature of the site, proper rules of decorum
will be enforced and the site will be
moderated by an epileptologist (Andrew
Wilner, MD). This service has been
expressly designed so that those with
basic, 'dialog' email access can have
complete and easy entry to the
discussions. Instructions for the use of the
site can be found on the ILAE home page
(www.ILAE.org).

To use the ILAE discussion group for
the first time, members must register on the
ILAE home page (www.ILAE.org).
Registration is simple and allows
identification of each member by name
and region. After creating a username
and password, members may contribute
messages to ongoing topics of discussion or
create their own topic (Figure 1). When
members 'subscribe' to a particular topic,
they will be notified by email of a
response. A link will be provided in the
email to bring them back to the discussion
on the ILAE website. Members can also
log-on to the ILAE website at their
convenience to review postings by other
members. Discussions are archived and
may be searched by topic at a later date.

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the ILAE website for its members, the ILAE
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24 hours a day and 7 days a week, will
provide an easy mechanism to facilitate
communication between members on topics
ranging from clinical research to patient
care. Conversations between members that
begin at the annual International Epilepsy
Congress and regional meetings
The International League Against Epilepsy (ILAE) approved four new member chapters at the 26th International Epilepsy Congress this past August in Paris, France. The four new chapters are:

List of Chapters
The aim of this CD-ROM is to illustrate and describe the signs most commonly seen during epileptic seizures. It is designed for use both as a teaching tool and for self-education. Purely subjective signs cannot be demonstrated by means of video and are therefore not included. From the clinical point of view, epilepsy is an organically established tendency to recurrent seizures. The seizure itself plays a central role in the diagnosis and treatment of epilepsy. Therefore it is important to recognize, identify and be able to adequately describe the various clinical signs that may comprise a seizure, in order to ensure a correct classification as a basis for therapeutic strategies.

A seizure is a paroxysmal disturbance of central nervous system function and is associated with excessive neuronal discharge that is synchronous and self-limited. This neuronal dysfunction can interfere with normal behavior and lead to alterations of motor, sensory and psychological function. During the course of an epileptic seizure or in the immediate post-ictal phase, a wide variety of signs may be observed that occur either sequentially or simultaneously. Thus the video clips in this CD-ROM often feature the same patient, and in some cases the same seizure, to illustrate different signs. Some of the video clips are very short because single signs have been extracted from the whole seizure in order to avoid overlap with other signs that might cause confusion.

Normal practice is to give some background information on patients and their case histories to avoid presenting patients as mere objects of study. In this CD-ROM, however, clinical data might misleadingly suggest an association of the sign with a particular seizure type, as the same sign occurs during many different seizure types. Therefore no clinical details are given, and the EEG descriptions and other electromyographic data are presented only when appropriate.

The summaries of the selected signs are purely descriptive and are based on ictal video recordings. They should not be interpreted as definitions in the sense of an official terminology catalogue. Additional findings from ictal surface electromyograms (EMGs) have been included in the descriptions of motor phenomena because they offer the only means of distinguishing between motor events of a short duration that cannot be properly differentiated by clinical examination and thus require simultaneous EMG recording.

Discounted Subscriptions for ILAE Members

The International League Against Epilepsy publishes its own international scientific journal Epilepsia. This is its primary vehicle for the dissemination of scientific and clinical information about epilepsy. It was launched in 1909 and is now the major epilepsy specialist journal and has the highest impact factor amongst epilepsy journals. Over the years, many leading research papers and reviews have been published in its pages, and is an essential read for all clinicians and scientists interested in epilepsy. Online access is also available to the archive of back issues. The archive is currently incomplete, with issues back only to 1937, but within the year it is hoped to archive all copies back to 1909 when Epilepsia was founded. This complete library is a vital resource, covering scientific papers in many aspects of epilepsy.

ILAE is pleased to offer reduced subscriptions to members and we urge all ILAE members to subscribe — these rates offer tremendous value. In addition, ILAE also offers discounted subscriptions to its members to the other specialist epilepsy journals shown below.

All these publications are available as print and/or online subscriptions, and subscriptions can be purchased through the International League Against Epilepsy’s secure online order form. Visit http://www.ilae.org/visitors/publications/index.cfm for more information.
OUT OF THE SHADOWS – THE GLOBAL CAMPAIGN AGAINST EPILEPSY

The Global Campaign Against Epilepsy is a joint initiative of ILAE, the World Health Organization (WHO), and the International Bureau for Epilepsy (IBE). Its mission is to bring epilepsy “out of the shadows” by improving diagnosis, treatment, prevention and social acceptability of the disorder world-wide. It aims to do this by:

- Increasing public and professional awareness of epilepsy as a universal treatable brain disorder
- Raising epilepsy on to a new plane of acceptability in the public domain
- Promoting public and professional education about epilepsy
- Identifying the needs of people with epilepsy on a national and regional basis
- Encouraging governments and departments of health to address the needs of people with epilepsy, including awareness, education, diagnosis, treatment, care, services and prevention.

The first phase of the Global Campaign Against Epilepsy was launched in June 1997 and was devoted primarily to increasing public and professional awareness of epilepsy as a universal treatable brain disorder, and raising epilepsy to a new plane of acceptability in the public domain. The second phase of the Global Campaign Against Epilepsy was launched in 2001 and was devoted primarily to activities that promote public and professional education about epilepsy, identify the needs of people with epilepsy on a national and regional basis, and encourage governments and departments of health to address the needs of people with epilepsy. The third phase was initiated this year and concentrates on special projects and on assisting health-care providers on epilepsy matters. The campaign is being led by the immediate ILAE past president Guiliano Avanzini for the ILAE, and Phil Lee for the IBE. Further details are available on the ILAE website.