

Three Minute Article for Parents

Epilepsy in Sri Lankan children

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Epilepsy is ranked as a common long-term nerve disorder. However, its incidence is lower than anticipated. Children and elderly are more affected due to causative factors that predominate in these two age categories.

When describing the disease burden, we look at the number of newly diagnosed cases for a period which is known as the incidence and the total number of cases with the diagnosis when evaluated at a given time point, which is the prevalence. The prevalence of childhood epilepsy is 3-4 per 1000 persons in the Western countries. However, it is higher in developing countries like ours. The difference is related to the higher rates of perinatal complications, neonatal septicaemia, congenital infections, etc. seen more in our settings, which directly affect the risk of epilepsy.

It is important to understand the details of epilepsy in a country since it helps to estimate the required care for this illness. This includes the number affected, need for specialized care as well as specific investigations, long-term treatment and care. This is especially so for the 30% of patients who never achieve seizure freedom on medications and need aggressive use of medications and other treatment modalities such as epilepsy surgery, vagal nerve stimulation etc. for epilepsy control.

Till recently we did not understand how common epilepsy is in children in our country. Furthermore, we did not understand the different types of epilepsies commonly encountered and how well controlled the affected children remain on medication. A recently published article describes the prevalence of epilepsy in the 0-16 age group in

Sri Lanka¹. This study, performed in the Ampara district, looked at epilepsy prevalence in three different age groups: 0-5 years, 6-10 years and 11 to 16 years. The total number of children evaluated was 4890 children. The prevalence of epilepsy was 5.7 per 1000 children in the same age group. The prevalence was slightly higher in the younger age group affecting 7.3 per 1000 in comparison to 5.5 in 6-10 age group to 5.04 per 1000 in the 11 to 16 age group. Boys were more affected than girls. The types of epilepsies included epilepsy arising from a single area of the brain as the most common type in all age groups and seen in overall 70% of affected children. The most valuable finding in this study was how well epilepsy is controlled in a population. Good control of epilepsy is denoted by lower scale score in the Engle's modified score for epilepsy control. This study revealed that control was satisfactory in the majority of children with 52% enjoying grade 1 and 2 epilepsy control. Poor control as denoted by grades 4 -5 was experienced by 26%. The investigators re-evaluated these children after one-year interval to reconfirm these findings and not surprisingly, most children remained controlled similarly.

This is the first ever study to describe prevalence data related to epilepsy in Sri Lankan children.

Reference

1. Wanigasinghe J, Arambepola C, Murugupillai R, Chang T. Age, sex and ethnic differentials in the prevalence and control of epilepsy among Sri Lankan children: a population-based study. *BMJ Paediatrics Open* 2019; **3**(1):e000430.