Factors influencing employment status in patients with epilepsy after surgical treatment

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Purpose: To investigate the social and medical factors related to employment status after epilepsy surgery. Subjects: 217 patients who underwent surgeries for epilepsy at our center between 1983 and 1996 and aged > 15 years at surgery (mean: 26.9 years) were studied. Methods: Employment status at 5-year after surgery and presurgical social behavior were surveyed by interviews. Demographic features were extracted from medical records. Results: 1. At 5 years after surgery, 171 patients (78.8%) were working (including housekeeping and working in sheltered workplace) (W group), 11 were students, 23 (10.6%) were unemployed (NW group), and 12 were lost to follow-up. The seizure status in W group and NW group was Engel class I: 79.5% and 30.4%, class II: 7% and 13%, class III: 7% and 21.7%, and class IV: 6.4% and 34.8%, respectively. Thus W group had significantly better seizure status than NW group (p<0.01). 2. Other factors related to employment status were examined. Presurgically, 99 of 136 Engel class I patients in W group were active in communicating with friends, while only 1 of 7 class I patients in NW group was active (p=0.01). Other presurgical social behaviors were not significantly related to employment status. Epileptological factors such as age of seizure onset or duration of illness before surgery did not differ between the two groups. Conclusion: Apart from postsurgical seizure outcome, presurgical social behavior such as communication with friends was related to employment status after surgery. This finding suggests that social rehabilitation should be launched even before surgery.

Therapy for neurocysticercosis "comparison between albendazole and praziquantel" in Wamena Lembah Baliem Jayawijaya Irian Jaya Indonesia

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Rationale: to study cases with suspected neurocysticercosis in order to decide future management with albendazole or praziquantel in endemic area in Wamena Lembah Baliem Jayawijaya Irian Jaya.

Methods: A total 72 individual with suspected neurocysticercosis, we performed a prospective study comparing between albendazole and praziquantel. 35 cases were treated with albendazole, and 37 cases with praziquantel. 3 cases with albendazole and 7 cases with praziquantel drop out cause side effect of drugs. After 1 year we only could control 9 from 32 patients with albendazole, 10 from 30 patients with praziquantel. All patients we diagnostic as suspected neurocysticercosis only by history of illness, physical and neurological examination, and serological examination were performed by immunoblot according to Ito et al (1998), no EEG and X-rays were made.

Result: Among 9 cases with albendazole, 3 cases with subcutaneous nodule and headache, 2 cases only headache, 2 cases seizure and headache, 2 cases no sign and symptoms, were all cases serologically positive. After treatment with albendazole 1200 mg, single dose/day until 8 days and prednison 20 mg single dose/day until 5 days. Only one case with seizure and headache, and 5 cases were serological still positive.

Among 10 cases with praziquantel, 3 cases with subcutaneous nodule and headache, 1 case only headache, 3 cases seizure and headache, 3 cases only sub-cutaneous nodule were all cases serologically positive. After treatment with praziquantel 1200 mg, single dose until 10 days. Only one case subcutaneous nodule and headache still has subcutaneous nodule, and 5 cases were serological still positive.

Conclusions: after 1 year treatment with albendazole and praziquantel. Albendazole more effective than praziquantel in reducing subcutaneous nodule. Praziquantel more effective than albendazole in reducing seizure and serological reaction, the real solution for this serious disease continues to be prophylaxis of infestation.