Sir William Osler said, “To study the phenomenon of disease without books is to sail an uncharted sea, while to study books without patients is to not go to sea at all.”* This book is about 40 people whose lives took a different course after they were affected by seizures and epilepsy. The chapters in this book represent case histories drawn from “real-life” experiences in people with seizures. The intent of presenting these patient histories in a case-based format is designed to stimulate the same deductive reasoning that is commonly used when seeing epilepsy patients in the clinic. The use of neuroimaging and neurophysiology in the study of patients with epilepsy has become a staple with which the diagnosis and treatment of epilepsy has become inextricably intertwined. Therefore, the correct interpretation of these studies is essential to reach the correct diagnosis and treatment. Following the clinical scenario composed of a wide variety of epilepsy cases, questions are posed to organize the reader’s thoughts in addressing each case. Questions that revolve around each patient include commonly asked questions such as, “How does this test help us with the diagnosis?” and “What is the precise relationship of the patient’s seizures to their overall neurological condition?” The most poignant questions include, “How does this information help us to devise a treatment plan?” and “What do we know about the anticipated course and prognosis?” The questions raised in each section incorporate answers to these questions about diagnosis, treatment, and prognosis where the knowledge base exists. They are addressed in a segment of the book that focuses on a discussion of the facts of the case. Where it is possible, these discussions rely upon the latest medical evidence to support the responses. At the end of each case a few salient citations are included. Our hope is to provide an overview of the topic and search for an expanded bibliography, if they so desire.

We learn from every patient. Our “take-home” messages are encapsulated in the form of clinical pearls that shape the basis of our understanding. Furthermore, these pearls of wisdom guide our decision-making in the approach to treatment of future patients with similar case scenarios. There is simply no written text that can replace the knowledge that is derived from hearing and seeing our patient and what they tell us. Our overreliance and overuse of “tests” will never replace the clues that our patients give us when we perform the neurological history and examination.
The field of epileptology encompasses some of the most dynamic and dramatic conditions that a Neurologist will face. Little is more surprising in the field of Medicine than the spontaneity and unpredictability of seizures. Case Studies in Epilepsy will aid in selecting the approach to a clinically based problem list in a style that we hope stimulates reasoning in a style that is fun. From cases that include first onset seizure to drug-resistant epilepsy, from seizures stemming from unknown causes to those produced by a brain tumor, from infancy to the elderly, diagnostic dilemmas and treatment challenges exist and require an individualized approach. Standard and novel diagnostic associations with seizures including genetics and autoimmunity are addressed in addition to nonmedical treatment options including epilepsy surgery, neurostimulation, dietary control, and alternative medicine. These topics are well represented by 40 illustrative case studies contained in this book. An introduction to some of the emerging treatments such as newer anti-seizure drugs, neurostimulators, and minimally-invasive brain surgeries for epilepsy are included. The cases themselves, serve as the platform to highlight and encompass the broad group of the epilepsies including those with genetic, structural-metabolic, and unknown causes. These cases were obtained from expert epilepsy clinicians at the Mayo Clinic. It is widely known that even in the most productive academic circles, even the most educated in epilepsy centers may be heard to say, “I remember that I once had a case of …”.


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