



2014 BIENNIAL CANADIAN EPILEPSY MEETING

PROGRAM

CANADIAN LEAGUE AGAINST EPILEPSY

OCTOBER 17 – 19, 2014

LONDON, ONTARIO

LONDON CONVENTION CENTRE



WELCOME FROM THE PRESIDENT

Dear friends and colleagues:

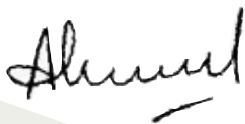
On behalf of the Canadian League Against Epilepsy (CLAE), it is my distinct pleasure to welcome you all to the fifth biennial meeting of the CLAE in London, Ontario.

This meeting is a joint meeting with our sister grassroots organization, Canadian Epilepsy Alliance (CEA), and I welcome all delegates from CEA to join us and make this meeting a success. The Scientific Committee chaired by Dr. Jorge Burneo has put together an excellent program covering clinical, surgical and social aspects of epilepsy. Additionally, you will also find some excellent sessions related to neuroimaging and genetic aspects of epilepsy. This meeting provides an excellent opportunity to network with your colleagues from across Canada as well as exchange your experiences and expertise in all aspects of epilepsy research and care.

I invite all members of CLAE to attend the AGM on Friday, October 17, where you will have an opportunity to vote in your new executives on the board, and attend the presidential speech of your incoming president, Dr. Nathalie Jette.

I sincerely hope that you all have a wonderful time in London, Ontario. I look forward to seeing all of you.

Sincerely,



S. Nizam Ahmed
President, CLAE



WELCOME FROM THE DIRECTOR OF EDUCATION

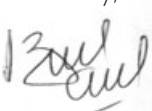
Dear CLAE members and friends:

Welcome to the 2014 Canadian Epilepsy Meeting.

The CLAE scientific committee has organized an excellent program for the meeting, which includes an update on epileptic encephalopathies, video-EEG monitoring in critically ill patients, stigma, barriers and driving, neuroengineering and epilepsy and genetic counselling in epilepsy. We will also have two new sessions called Special Interest Groups, with a focus on neurosurgery and neuro-imaging, as well as our plenary session on the current situation of epilepsy care in Canada. We also welcome members from the Canadian Epilepsy Research Initiative (CERI) and the Canadian Epilepsy Alliance (CEA).

I sincerely hope that you will enjoy the meeting.

Sincerely,



Jorge Burneo, MD, MSPH, FAAN
Director of Education, CLAE

2014 Biennial Scientific Meeting Committee

Jorge Burneo, Chair, CLAE Biennial Meeting
Nizam Ahmed, CLAE President 2012–2014
Elizabeth Donner, Secretary Treasurer
Nathalie Jette, President-Elect
Michael Poulter, Member, Executive Committee (CERI)
Peter Carlen, Member, Biennial Meeting Committee Member

Education Committee

Mary Connolly
Jose Tellez-Zenteno
Eliane Kobayashi
Danielle Andrade



300 Dufferin Avenue
PO Box 5035
London ON
N6A 4L6



Office of the Mayor

October 17, 2014

Canadian League Against Epilepsy Biennial Meeting

Dear delegates and guests:

As Mayor, and on behalf of Londoners, I am pleased to welcome participants of the Canadian League Against Epilepsy Biennial meeting. London is proud of its reputation as host to national and international conventions and gatherings, and I am certain you will find the London Convention Centre to be a perfect venue. We understand the importance of first-rate facilities, comfortable accommodations and a warm smile. We love to have guests.

We are also well versed in understanding the significance of, and need for, ongoing and comprehensive study and research into epilepsy. The Epilepsy Program at Western and the London Health Sciences Centre is well known to Londoners, as it is around the world, as a pre-eminent facility for study and treatment of patients affected by this disorder. I wish you all the best as you share your knowledge and find greater resources to push forward with research and ultimately more effective treatments for this serious neurological condition.

You will, of course, be focused on the purpose of your meetings but I hope you also find time to enjoy our city. London offers a walkable downtown and uptown with dining options to suit every taste. Our music and theatre venues provide “live” performances and you will recognize exceptional talent. Shops, galleries and farmers’ markets are a wonderful diversion and will tempt you to pick up just the right remembrance of your visit to the Forest City.

Please take a stroll along the Thames River. A fall walk through some of the most beautiful parks in the Province rejuvenates the soul. Afterwards, make time for yourself – find a café – and warm up with the perfect coffee or specialty hot chocolate. Take your time and get to know us.

If you have not visited the Canadian Medical Hall of Fame, you should. Located in the heart of our downtown, this extraordinary facility honours the scientific and medical excellence of our country and your colleagues. Just a few blocks away is Banting House, a national historical site and the historic home of Sir Frederick Banting.

Thank you for choosing London to be your host. Your work is important, your dedication unquestionable and your purpose vital. I trust your time here will be worthwhile.

Enjoy your visit and remember, we would love to see you again.

Sincerely,

Joni Baechler
Mayor

2014 CANADIAN BIENNIAL EPILEPSY MEETING

The Canadian League Against Epilepsy (CLAE) is one of 98 chapters of the International League Against Epilepsy (ILAE). The CLAE is an organization of medical and basic sciences professionals counting more than 175 members including physicians, basic scientists and other researchers, nurses, neuropsychologists, neuroradiologists, students and other health professionals. Our members are all keen to take advantage of their passion and their knowledge in their respective fields to better respond to various basic needs of the epilepsy population, present and future. We also work in collaboration with several organizations such as the Canadian Epilepsy Alliance, the American Epilepsy Society and the North American Commission of the ILAE. The Canadian Biennial Epilepsy Meeting is the largest Canadian meeting of those who share the common scientific and clinical interests of epilepsy and clinical neurophysiology.

MISSION STATEMENT

Our goal is to develop, through research, innovative therapeutic and preventative strategies to avoid the consequences of epilepsy. We also want to translate these discoveries into applicable therapies for all Canadians. Finally, we want to promote national awareness and educate all Canadians about epilepsy and its consequences with the help of the Canadian Epilepsy Alliance.

MEETING OBJECTIVES

The main objectives of the meeting are to:

- Learn about the latest and emerging basic science and clinical research discoveries in the field of epilepsy.
- Learn about the different advances in neuroimaging techniques in the assessment of patients with epilepsy.
- Discuss the up-to-date management of epilepsy.
- Discuss the barriers encountered by patients and treating physicians regarding stigma and driving.
- Enhance interactions among health professionals and researchers in varied disciplines of epilepsy.
- Learn about the current state of epilepsy care across the country.



POLICY ON COMMERCIAL SUPPORT AND CONFLICT OF INTEREST

All faculty and planners are required to disclose any conflict of interest during their presentations.

EXHIBITS

Meeting participants will have an ideal opportunity to learn about the latest in pharmaceutical, publications, scientific equipment and technology relevant to the field of epilepsy and neurophysiology. The commercial exhibits will take place on Saturday, October 18 from 8:00 a.m. – 5:00 p.m. and Sunday, October 19 from 8:00 a.m. – 12:00 p.m.

CONTINUING PROFESSIONAL DEVELOPMENT

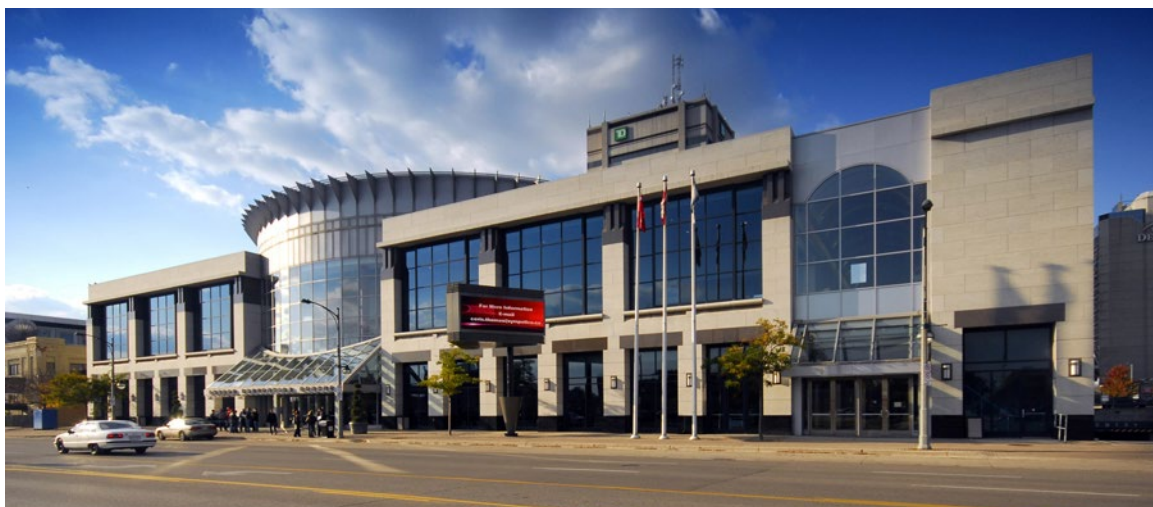
This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada and approved by Continuing Professional Development, Schulich School of Medicine & Dentistry, Western University (13.5 hours).

Each participant should claim only those hours of credit that he/she actually spent participating in the educational program.



VENUE INFORMATION

The London Convention Centre is located in the heart of downtown London, Ontario. This venue is located 11 km from the London International Airport (YXU), with several hotels including the Hilton and Delta within walking distance. This multi-use facility has hosted several successful conferences with exceptionally skilled staff and professional service.



Address: 300 York Street London, Ontario N6B 1P8

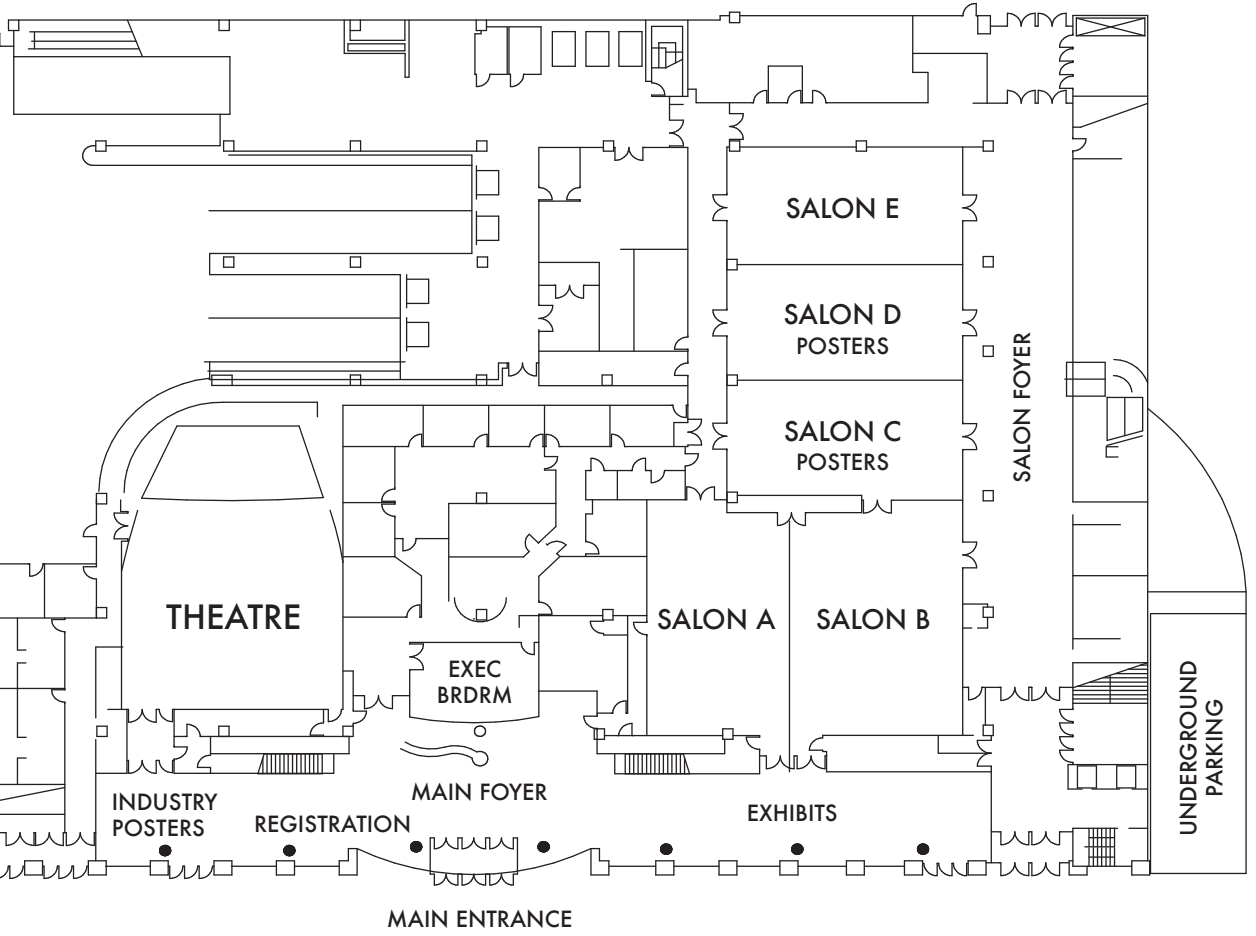
Phone Number: 1-800-203-1992

Email: info@londoncc.com

Website: www.londoncc.com



PROGRAM FLOORPLAN



PROGRAM AT A GLANCE

Friday, October 17, 2014

TIME	DESCRIPTION	ROOM
4:00 p.m.	Registration	Main Foyer
5:00 p.m.	Annual General Meeting	Theatre
6:00 p.m.	Dr. Nizam Ahmed (CLAE President)	Theatre
6:15 p.m.	Presidential Lecture: Dr. Nathalie Jette (Incoming CLAE President)	Theatre
6:45 p.m.	Dr. Michael Poulter and Dr. Peter Carlen: <i>Improving the relationship between basic scientists and clinicians</i>	Theatre
7:00 p.m.	Dr. William Stacey: <i>Understanding seizures: new theories, technologies and techniques</i>	Theatre
8:00 p.m.	Wrap up for the day	Theatre



PROGRAM AT A GLANCE

Saturday, October 18, 2014

TIME	DESCRIPTION	ROOM
7:00 a.m.	Registration	Main Foyer
7:00 a.m.	Breakfast	Salon Foyer
8:00 a.m.	PLENARY SESSION	Theatre
	EPILEPSY IN CANADA: HOW ARE WE DOING? (Chair: Dr. Sharon Whiting, University of Ottawa)	
	Learning Objectives: <ul style="list-style-type: none"> • To discuss the state of epilepsy in Canada from a provincial lens. • Examine strategies being used, what is working and what could be adopted by others. 	
	Target Audience: epileptologists, epilepsy surgeons, nurses and other allied health professionals, administrators, fellows, residents and other students.	
	Topics and Speakers: <ol style="list-style-type: none"> <i>Update on epilepsy in Ontario</i> (Dr. Carter Snead, University of Toronto) <i>Update on epilepsy in Alberta</i> (Dr. Samuel Wiebe, University of Calgary) <i>Update on epilepsy in Quebec</i> (Dr. Lionel Carmant, University of Montreal) 	
10:00 a.m.	Break and Exhibits	Salon Foyer
10:15 a.m.	BREAKOUT SESSIONS	
	SESSION 1: EPILEPTIC ENCEPHALOPATHIES (Chair: Dr. Rajesh RamachandranNair, McMaster University)	Theatre
	Learning Objectives: <ul style="list-style-type: none"> • To understand the concept of epileptic encephalopathy, and appreciate, with examples, that all epilepsies, if severe enough, can produce an encephalopathy. • To understand the link between infantile spasm and autism, the role of mTor in synaptic functions, and mTor as a target for infantile spasm and co-morbidity therapy. • To recognize the clinical presentations and management options of childhood onset epileptic encephalopathies in adults, and the associated comorbidities. • To understand the challenges associated with the traditional definition of encephalopathy associated with ESES, and need for a better assessment tool to aid optimal therapy. • To understand the role of dietary therapy in the treatment of epileptic encephalopathy. 	
	Target Audience: epileptologists, neurologists, residents, fellows, neuropsychologists, neurogeneticists, dietitians and basic science investigators.	
	Topics and Speakers: <ol style="list-style-type: none"> <i>Epileptic encephalopathy</i> (Dr. Peter Camfield, Dalhousie University) <i>Infantile Spasms: what is new in treatment?</i> (Dr. Lionel Carmant, University of Montreal) <i>Encephalopathy associated with ESES: counting beyond spikes</i> (Dr. Rajesh RamachandranNair, McMaster University) <i>Epileptic Encephalopathy: frightening pediatric disorders that often persist into adulthood</i> (Dr. Danielle Andrade, University of Toronto) <i>Epileptic Encephalopathy: is there a role for dietary therapy?</i> (Dr. Morris Scantlebury, University of Calgary) 	



PROGRAM AT A GLANCE

Saturday, October 18, 2014

TIME	DESCRIPTION	ROOM
10:15 a.m.	<p>BREAKOUT SESSIONS (cont'd)</p> <p>SESSION 2: VIDEO-EEG MONITORING IN CRITICALLY ILL PATIENTS (Chair: Dr. Dang Nguyen, University of Montreal)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To review the nomenclature of commonly encountered EEG patterns in critical ill patients. • To review the cellular mechanisms underlying commonly encountered EEG patterns in critically ill patients such as burst-suppression, periodic discharges and SIRPIDS. • To review and compare the different definitions of non-convulsive status epilepticus in the literature. • To review the different criteria used to diagnose non-convulsive status epilepticus. • To review the intra-rater, inter-rater ratio for diagnosing non-convulsive status epilepticus. • To review the evidence whether non-convulsive status epilepticus results in additional brain injury. • To review the evidence whether treatment of non-convulsive status epilepticus is beneficial. <p>Target Audience: neurologists, epileptologists, residents, fellows and basic scientists.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Common video-EEG patterns during continuous video-EEG monitoring in critically ill patients</i> (Dr. Nathalie Jette, University of Calgary) <i>Pathophysiology of common video-EEG patterns seen in critically ill patients</i> (Dr. Florin Amzica, University of Montreal) <i>What is non-convulsive status epilepticus?</i> (Dr. Teneille Gofton, Dalhousie University) <i>Is there any evidence that the treatment of non-convulsive status epilepticus is beneficial?</i> (Dr. Cecil Hahn, University of Toronto) 	Salon E
12:00 p.m.	LUNCH	Salon Foyer
1:00 p.m.	Poster Tour (Authors to stand by their posters)	Salon C & D
2:00 p.m.	<p>BREAKOUT SESSIONS</p> <p>SESSION 1: SIG: SURGICAL FAILURES (Chair: Dr. Andrew Parrent, Western University)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To identify cases of medically refractory epilepsy who are candidates for surgery. • To discuss the different techniques of non-invasive and invasive evaluation in cases of medically refractory epilepsy. • To discuss the surgical approaches for epilepsy surgery. • To identify commonalities in cases with failure to epilepsy surgery. • To discuss cases with experts from different Canadian epilepsy centres. <p>Target Audience: neurosurgeons, epileptologists, epilepsy fellows, neurosurgery and neurology residents.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Case from London, ON</i> (Dr. Jorge Burneo and Dr. Andrew Parrent, Western University) <i>Case from Halifax, NS</i> (Dr. Mark Sadler, Dalhousie University) <i>Case from Calgary, AB</i> (Dr. Walter Hader, University of Calgary) <i>Case from Montreal, QC</i> (Dr. Dang Nguyen, University of Montreal) 	Theatre



PROGRAM AT A GLANCE

Saturday, October 18, 2014

TIME	DESCRIPTION	ROOM
2:00 p.m.	<p>BREAKOUT SESSIONS (cont'd)</p> <p>SESSION 2: STIGMA, BARRIERS AND DRIVING (Chair: Dr. Jeffrey Jirsch, University of Alberta)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To discuss the epidemiology, predictors and causes of stigma in epilepsy. • To discuss the impact of social factors upon the quality of life of our patients. • To identify institutionalized barriers to employment and driving that impact the social integration of people with epilepsy. • To discuss the wider implications of psychosocial factors upon the clinical management of people with epilepsy. <p>Target Audience: neurologists, epileptologists, residents and other students, nurses and other allied health professionals.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Stigma in Epilepsy – Who, where and why?</i> (Dr. Nathalie Jette, University of Calgary) <i>The Importance of social factors upon quality of life in people with epilepsy</i> (Dr. Kathy Speechley, Western University) <i>Barriers to employment in epilepsy</i> (Dr. Jose Tellez-Zenteno, University of Saskatchewan) <i>Driving restrictions in seizure patients: Are they effective?</i> (Dr. Jeffrey Jirsch, University of Alberta) 	Salon E
3:45 p.m.	<p>Break and Exhibits</p>	Salon Foyer
4:00 p.m.	<p>BREAKOUT SESSIONS</p> <p>SESSION 1: NEUROENGINEERING AND EPILEPSY (Co-Chairs: Dr. Michael Poulter, Western University and Dr. Peter Carlen, University of Toronto)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To appreciate some of the revolutionary advances in engineering science as applied to the field of epilepsy, which will impact greatly on clinical practice in the near future. <p>Target Audience: epileptologists, neurosurgeons, neurologists, basic science investigators, residents, fellows, neuropsychologists, nurses and EEG technicians.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Wearable and implantable wireless microsystems for continuous EEG monitoring and feedback stimulation</i> (Dr. Tariq Salam, University of Toronto) <i>Near infrared spectroscopy: shining light on seizures</i> (Dr. Dang Nguyen, University of Montreal) <i>Signal processing of EEG and iEEG for seizure identification</i> (Dr. Berj Bardakjian, University of Toronto) <i>Identifying and classifying high frequency oscillations with big data tools</i> (Dr. William Stacey, University of Michigan) 	Theatre



PROGRAM AT A GLANCE

Saturday, October 18, 2014

TIME	DESCRIPTION	ROOM
4:00 p.m.	<p>BREAKOUT SESSIONS (cont'd)</p> <p>SESSION 2: GENETIC COUNSELLING IN EPILEPSY (Chair: Dr. Eva Andermann, McGill University)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To learn the latest genetic classification of epilepsies and epileptic syndromes, as well as the principles of genetic counselling as applied to epilepsy. • To learn about recurrence risks for various epilepsy syndromes with complex inheritance, and to discuss specific examples of counselling situations in idiopathic and symptomatic epilepsies. • To discuss the ethical context of genetic counselling and family studies in the epilepsies. <p>Target Audience: neurologists, epileptologists, neurogeneticists, molecular geneticists, residents and graduate students.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Genetic classification of the epilepsies</i> (Dr. Eva Andermann, McGill University) <i>Principles of genetic counselling as applied to epilepsy</i> (Dr. Patrick Cossette, University of Montreal) <i>Genetic Counselling in idiopathic and symptomatic epilepsies</i> (Dr. Ruth Ottman, Columbia University) <i>Ethical implications in genetic counselling and family studies of the epilepsies</i> (Ma'n H. Zawati, McGill University) 	Salon E
5:45 p.m.	Wrap up for the day	Theatre
6:00 p.m.	SOCIAL HOUR: A tour of the Canadian Medical Hall of Fame	
7:00 p.m.	Reception and Dinner (Ticket must be purchased in advance)	Salon A/B



PROGRAM AT A GLANCE

Sunday, October 19, 2014

TIME	DESCRIPTION	ROOM
7:30 a.m.	Breakfast	Salon Foyer
8:30 a.m.	<p>PLENARY SESSION: Special Session from The Canadian Epilepsy Alliance</p> <p>WORKING TOGETHER TO IMPROVE EPILEPSY CARE IN CANADA (Moderator: Gail Dempsey, CEA President)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To understand epilepsy from the perspective of the family that lives with the condition on a daily basis. • To develop a greater appreciation of the complexity of epilepsy to help clinicians to provide a more person-centred approach to their care. • To examine opportunities for enhanced CLAE/CEA collaboration to improve epilepsy care in Canada. <p>Target Audience: epileptologists, epilepsy surgeons, nurses and other allied health professionals, administrators, fellows, residents and other students.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Ultimate success in Epilepsy: A patient's perspective</i> (Michelle Deninson) <i>Improving access to medications</i> (Dr. Suzanne Nurse, Epilepsy Ontario) <i>From clinic to community: A health care linkage program</i> (Mary Secco, Epilepsy Support Centre, London) <i>Political Advocacy: Provincial and National Initiatives</i> (Rozalyn Werner-Arcé) <i>How can the CLAE/CEA collaborate to improve epilepsy care in Canada?</i> (Round Table) 	Theatre
10:00 a.m.	Break and Exhibits	Salon Foyer



PROGRAM AT A GLANCE

Sunday, October 19, 2014

TIME	DESCRIPTION	ROOM
10:15 a.m.	<p>BREAKOUT SESSIONS</p> <p>SESSION 1: CONTROVERSIES AND ADVANCES IN NEUROIMAGING OF EPILEPSY (Chair: Dr. Eliane Kobayashi, McGill University and Dr. Ali Khan, Robarts Research Institute)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To discuss recent advances in neuroimaging as it pertains to epilepsy. • To discuss technologies available to help in the localization of seizure focus when standard MRI is negative. • To discuss the new technologies available for the assessment of memory in patients with epilepsy undergoing a presurgical evaluation. <p>Target Audience: neurologists, epileptologists, neurosurgeons, neuropsychologists, fellows, residents, medical students and imaging researchers.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>Finding lesions when MRI is negative and the role of functional neuroimaging (EEG-fMRI and PETfMRI)</i> (Dr. Francois Dubeau and Dr. Eliane Kobayashi, McGill University) <i>Do we need high-field MRIs? What are the benefits?</i> (Dr. Ali Khan, Robarts Research Institute) <i>fMRI for memory: will it ever replace the WADA test?</i> (Dr. Mary Pat McAndrews, University of Toronto and Dr. Paolo Federico, University of Calgary) 	Theatre
	<p>SESSION 2: ICTAL SEMIOLOGY (Chair: Dr. Jorge Burneo, Western University)</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • To discuss ictal seizure semiology, focusing on seizure onset and patterns of seizure propagation. • To compare seizure semiology with presurgical investigation results, including data from invasive recordings (if available) and outcome following surgical intervention. <p>Target Audience: neurologists, neurosurgeons, residents, nurses, medical and nursing students.</p> <p>Topics and Speakers:</p> <ol style="list-style-type: none"> <i>A case from the Maritimes</i> (Dr. Mark Sadler, Dalhousie University) <i>French Canadians seize too?</i> (Dr. Richard Desbiens, Laval University) <i>Experience from the Prairies</i> (Dr. Jose Tellez-Zenteno, University of Saskatchewan) <i>A case from Ontario</i> (Dr. Jorge Burneo, Western University) 	Salon E
12:00 p.m.	Wrap up and completion of participant evaluation	Theatre



POSTERS

Posters will be on display Saturday, October 18 from 8:00 a.m. – 6:00 p.m. and Sunday, October 19 from 8:00 a.m. – 12:00 p.m. The poster tour is from 1:00 p.m. – 2:00 p.m. on Saturday, October 18 in Salon C & D. Authors are required to stand by their poster for a Q&A at this time.

No.	Abstract Title	Author
NEUROIMAGING		
1.	Patient-specific MRI asymmetry analysis in temporal lobe epilepsy and its role in seizure lateralization	Diego Cantor-Rivera
2.	Determining structural correlates of resting state functional connectivity changes in temporal lobe epilepsy patients	Jonathan Lau
3.	Quantitative MRI correlates of hippocampal pathology in refractory temporal lobe epilepsy	Maged Goubran
CLINICAL EPILEPSY/EEG/ANTIEPILEPTICS		
4.	Lennox-Gastaut Syndrome associated with dysgenesis of corpus callosum	Muhammad Umair
5.	Focus localization of reflex focal seizures	Handsun Xiao
6.	Antecollis and levodopa-responsive Parkinsonism are late features of dravet syndrome	Alfonso Fasano
7.	Features associated with refractoriness in patients with primary generalized epilepsy	Asier Gomez-Ibañez
8.	Precuneal epilepsy	Louis Harris
9.	Double-blind, placebo controlled trial of the anticonvulsant effects of n-3PUFAs in patients with epilepsy	Paul Hwang
10.	Multichannel portable fNIRS-EEG system for long-term monitoring of seizures	Ali Kassab
11.	Coprolalia as a manifestation of epileptic seizures	Andreu Massot-Tarrus
12.	ADNFLE: a misnomer	Melanie Nguyen
13.	Quality of life in women with epilepsy in pregnancy: an exploratory needs assessment	Judy Qiang
14.	Safety of eslicarbazepine acetate in patients with refractory partial-onset seizures treated with or without concomitant carbamazepine: a pooled analysis of three phase III controlled studies	Selim Benbadis
15.	Efficacy of eslicarbazepine acetate in patients with refractory partial onset seizures: a pooled analysis of three phase III controlled studies	Victor Biton
16.	Efficacy of eslicarbazepine acetate in patients with refractory partial-onset seizures treated with or without concomitant carbamazepine: a pooled analysis of three phase III controlled studies	Steve Chung



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No.	Abstract Title	Author
17.	Adverse event profile of eslicarbazepine acetate during dose titration in phase III controlled studies of patients with refractory partial-onset seizures	Gregory Krauss
18.	Lacosamide added to a monotherapy in epilepsy patients with partial-onset seizures: final analysis of the VITObA study	Matthias Noack-Rink
19.	Eslicarbazepine acetate as adjunctive treatment for refractory partial-onset seizures: pooled analysis of safety data from three phase III controlled trials	Joanne Rogin
20.	Lacosamide conversion to monotherapy: effects on partial-onset seizure frequency in a historical-controlled multicentre, double-blind, randomized trial	Robert Wechsler
21.	Lacosamide for uncontrolled primary generalized tonic-clonic seizures: an open-label pilot study with 59-week extension	Robert Wechsler
PEDIATRIC EPILEPSY		
22.	Aicardi Syndrome: long-term evolution	Anfal Ali
23.	Epilepsy in tuberous sclerosis complex: experience at a provincial TSC clinic	Colin Wilbur
24.	Hemimegalencephaly: what happens when children get older?	Nicky Wu
25.	EEG prior to weaning anti-epileptic therapy in seizure-free children: a cost-effectiveness analysis	Bláthnaid McCoy
26.	Long-term intellectual functioning following epilepsy surgery in childhood	Klajdi Puka
27.	Childhood-onset nonprogressive chronic encephalitis	Philippe Rizek
28.	Long-term psychiatric comorbidity in children who underwent functional hemispherectomy for treatment resistant epilepsy	Chinnuwat Sanguanserm Sri
29.	Whole exome sequencing in intractable pediatric epilepsy patients in Calgary	Luis Bello-Espinosa
30.	Epilepsy transition: challenges of caring for adults with childhood-onset seizures	Filippe Borlot
31.	Childhood epilepsy: the role of the family on emotional well-being 2 years after diagnosis	Shane Goodwin



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No.	Abstract Title	Author
STATUS EPILEPTICUS/CRITICAL CARE		
32.	Bowel ischemia in the management of refractory status epilepticus: report of two cases and review of the literature	Philippe Rizek
33.	Evaluating the efficacy and safety of high dose barbiturates in pediatric refractory status epilepticus	Christopher Griffiths
34.	Hippocampal changes in refractory status epilepticus: an autopsy study	Kristen Ikeda
35.	New onset refractory status epilepticus: experiences and outcomes at London Health Sciences Centre	Kristen Ikeda
BASIC SCIENCE/ENGINEERING		
36.	Effect of age on the development of post-traumatic epilepsy	Aylin Reid
37.	Potassium inhibits seizure like events (SLEs) in vivo and in vitro	Lihua Wang
38.	Exhausted glutamate release implicated in seizure termination in an in vitro model of intractable epilepsy	Vanessa Breton
39.	Brainstem electrographic discharges associated with respiratory arrest	Tariqus Salam
40.	Early-onset post-ischemic seizures observed from aging mice: regional initiation, influences to acute mortality and responses to anticonvulsive drug treatments	Liang Zhang
EPILEPSY SURGERY		
41.	Long-term emotional functioning after pediatric epilepsy surgery	Tamara Tavares
42.	Deep brain stimulation of the anterior nucleus of the thalamus for intractable generalized epilepsy with drop attacks	Syed Rizvi
43.	Epilepsy surgery trends in Ontario, Canada (1999–2010)	Jorge Burneo
44.	Assessment of knowledge and attitudes as well as patterns of referral about epilepsy surgery among family doctors in Ontario	Nicholas Cothros
45.	Deep brain stimulation for the management of seizures in MECP2 duplication syndrome	Fabio Nascimento



Because being patient-centric means helping those who help patients the most.



At UCB Canada Inc., being patient-centric means wanting to make the lives of patients better. It means forming lasting partnerships with Canadian healthcare professionals and providing them with the necessary resources to help them help their patients. It means constantly researching new and innovative therapies to help in their practice. It means going beyond the medicine to offer something truly unique: a company that listens. Because all meaningful solutions come from listening to the needs of patients and the Canadian healthcare professionals who treat them.



Inspired by **patients.**
Driven by **science.**

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Date of preparation: May 2014

SPONSORSHIP

This program is sponsored in part by educational grants from UCB, Eisai, Sunovion, Novartis, Baylis, Natus and GeneDX.

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GOLD SPONSOR



BRONZE SPONSOR



EXHIBITORS



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