



Dear Colleagues,

I am pleased to release the second issue of the seventh volume of '**CLAE Connections**', the official newsletter of the Canadian League Against Epilepsy. Inside you will find a treasure trove of information from colleagues from across the country.

The next issue of '**CLAE Connections**' is expected sometime in June 2020; until then, happy reading.

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## Editor's introduction



Dear all,

I am excited to release our new issue of CLAE Connections! We have been hard at work on our end producing this content, which hopefully builds on our first issue's success. We have been musing on increasing the frequency of the newsletter to stay ahead of current events, conferences and are holding discussions currently on how best to approach this.

A big highlight for me was the birth of my second daughter this past October! Another big highlight however was our CLAE annual scientific meeting which was rich and stimulating and gave us all the opportunity to reconnect with one another and strategize around projects and initiatives for the upcoming year. I think we have a vibrant and close knit community and being a part of the CLAE is a privilege I hold dear.

As always, I hope that you find this issue stimulating and thought provoking, and please share your thoughts and comments with me- our group is always open to feedback. This issue would not have been possible without the support of CLAE members who contributed to its content as well as our dedicated Publications Committee members.

A heartfelt thank YOU to all!

Sincerely,

Tadeu Fantaneanu, MDCM, FRCPC.

Editor-in-Chief

## Message from the President



Dear colleagues,

What an exciting and productive year 2019 has been! Many exciting events including our Scientific Meeting, collaborations and awards have taken shape this year. I am pleased to share the below updates with you and look forward to the new developments the rest of 2020 will bring.

### **Board of Directors**

I would like to extend a warm welcome the new Director of Education Chair, Dr. Aylin Reid and Secretary, Dr. Esther Bui to the CLAE Board of Directors.

I would also like to thank Dr. Mary Lou Smith for her outstanding commitment in serving as our very capable Secretary for the last 5 years. Thank you also to Dr. Mark Keezer for his efforts in leading the Education committee to organize our Annual Scientific Meeting.

### **Awards**

2020 Award Announcements:

- Our Fellowship Awards will open early December 2019.
- **\*NEW\*** the CLAE will be offering Summer Studentship Awards! Stay tuned for more details. These awards will open early February 2020.
- Our Publication Awards will open early March 2020.

### **2019 CLAE ASM**

This year's CLAE Scientific Meeting was held in Winnipeg at the Fort Garry Hotel, Spa and Conference Centre from September 20-22, 2019. This year we had 173 attendees (103 delegates, 44 speakers and 26 sponsor representatives) and had a record breaking 60 abstracts. These are really good numbers with great growth! There were various registration categories and these include Health Care Provider/Scientist, Physician, Coordinator/Research Assistant, Health Care Provider, Scientist, Trainee, Conference Speaker (Health Care Provider/Scientist, & Physician) and Staff and volunteers with affiliate organizations. The two highest registration category turnouts were Trainee and Physician.

With great appreciation, I would like to thank Dr. Mark Keezer, and the Education Committee.

A total of 36 people registered to participate in the Fun Run/Walk. In comparison to previous years, 2016, 2017 and 2018 had 28, 39 and 38 people registered respectively. This year, there was a total donation collection of \$4,417! Significantly higher than 2018's donation collection of \$2,653.00. A special congratulations to Dr. Kathy Speechley, who won 2 nights free accommodation at this conference for her stellar fundraising. Thank you to those who donated and participated. Because of your generosity, people with epilepsy and members of the Canadian league will have a new breath of hope and courage to pursue their dreams.

### **Gotman/Jones-Gotman Fundraising Dinner**

'In honour of Dr. Jean Gotman and Dr. Marilyn Jones-Gotman, the CLAE is hosting a fundraising dinner to acknowledge their research and clinical contributions, which have benefitted and will continue to benefit the epilepsy community. The dinner will take place after the first day of the scientific meeting Epilepsy 2020: A vision of the future in epilepsy research at the Montreal Neurological Institute, with a reception starting at 6.30 p.m. EDT.

Join us for a night of fun filled conversation and the chance to network with epilepsy/neuropsychology professionals from across the country and the world. Our goal is to raise funds to create a CLAE research award to honour Dr. Jean Gotman and Dr. Marilyn Jones-Gotman.

Registration is now open! For more information and to register, [click here](#).

### **SAVE THE DATE: 1st North American Epilepsy Congress (NAEC)**



#### **1st North American Epilepsy Congress**

Toronto, Canada | 25-27 September 2020

[www.epilepsycongress.org/naec/](http://www.epilepsycongress.org/naec/)

[Click here](#) to view a welcome message for the 1st North American Epilepsy Congress from the co-chairs of the Scientific and Organising Committee.



The Canadian League Against Epilepsy invites you to

## **The Gotman/Jones-Gotman Fundraising Dinner**

**MAY 8, 2020 | 6:30 PM**

**HÔTEL NELLIGAN**  
**MONTREAL, QUÉBEC**

*Donations will be allocated to the creation of an epilepsy research award to honour Dr. Jean Gotman and Dr. Marilyn Jones-Gotman*



**CLAE Social Media**

We have expanded our social media in the past year to include LinkedIn, Twitter, Facebook, and Instagram. Be sure to follow us @CLAE\_LCCE!



Thank you,

Dr. Dang Nguyen

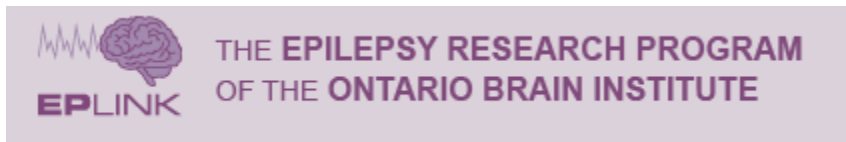
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## Recent News and Awards

### A new initiative from the OBI!

The Ontario Brain Institute's epilepsy research program (EpLink) is looking to better understand the questions Canadians have about epilepsy and seizures through a survey found at the following site: [braininstitute.ca/epilepsy-PSP](http://braininstitute.ca/epilepsy-PSP). This survey will help researchers and research funding organizations better identify what is important to people living with epilepsy and/or seizures and incorporate their priorities when planning future projects. If you have epilepsy or experience seizures, or if you care for or work with someone who does, we want your help in setting the priorities for epilepsy research.

Contribute your voice today!



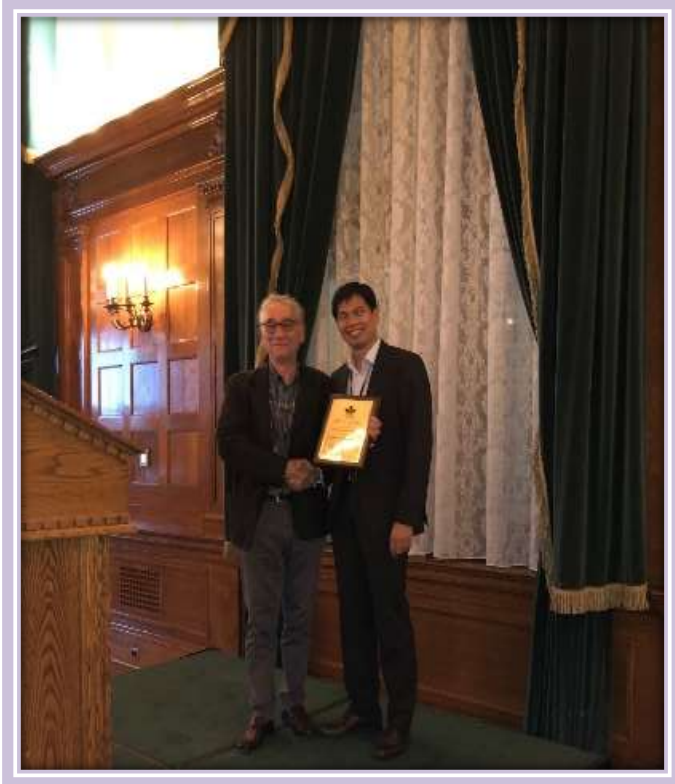
### Some fun pics from the CLAE Annual Scientific meeting

Our meeting was well attended and the Gala night was a huge success with many colleagues honored for their work, here are some pictures of the award winners and their contributions:



#### **Dr. Boris Bernhardt**

**Junior Investigator Award:** To honour a CLAE member within five years of their first academic appointment for outstanding research contributions in epilepsy.



**Dr. Dang Nguyen**

**Excellence in Research Award:** To recognize research excellence by Canadian researchers in the field of epilepsy.

**Dr. Alan Guberman**

*Dr. Tad Fantaneanu accepted on Dr. Guberman's behalf.*

**Wilder Penfield Award:** Honouring a CLAE member for outstanding lifetime clinical and/or research contributions in epilepsy.





**Dr. Jose F. Tellez-Zenteno & Dr. R. Mark Sadler**

**Clinical Practice/Advocacy Award:** Honouring a CLAE member in recognition for her/his excellency in clinical practice and/or engagement in representing and supporting patients with epilepsy.

During the meeting, many members participated in a fundraising fun walk and braved the cold and the darkness all for a good cause!





## Current clinical trends from across the country

*I recently asked Dr. Michelle Shapiro from the Hamilton Health Sciences Center to briefly describe their "Epilepsy Half Day" model.*

**Could you please provide me with 3-5 lines on your Epilepsy Half Day: What is it? Who participates? Who is the target audience?**

We run the half day once a year. The target audience is family physicians. They are the majority of who attend, but we also have residents, EEG techs, nursing staff and some neurologists. We change topics each year and give about 5, 20 minute talks.

**What is the feedback you are getting?**

We are getting pretty good feedback. I think education is always good and I do think other centers could think about doing the same thing.



*Je me suis aussi entretenu avec le Dr. Richard Desbiens, épileptologue au Centre Hospitalier Universitaire de Québec au sujet de l'utilisation de la stimulation cérébrale profonde (DBS) pratiquée dans leur centre.*

**Qu'est-ce qui vous a poussé vers le DBS (en défaveur du VNS par exemple) pour les patients en question?**

Les patients soumis au DBS étaient des patients qui avaient échoué à la fois toutes les médications antiépileptiques, une chirurgie d'exérèse et le VNS. Ils demeuraient avec une fréquence élevée de crises.

**Est-ce que ce fut difficile de se lancer dans cette chirurgie? (eg. Difficultés à acquérir les électrodes, difficultés en ce qui attrait aux connaissances requises pour programmer ou difficultés d'obtention de fonds pour réaliser ce projet)**

Les 2 patients furent implantés pour leur DBS en mars 2019. Un des patients était du CHU de Québec-Université Laval et l'autre était un patient du CHUM. Les implantations furent faites en collaboration par les neurochirurgiens Dre Marie-Pierre Fournier-Gosselin (CHUM) et Léo Cantin (CHU de Québec). La Compagnie Medtronic a fourni son expertise en dépêchant un expert européen pour faciliter les procédures.

Au plan financier, nous avons obtenu une permission exceptionnelle pour effectuer la procédure. Les procédures subséquentes feront l'objet d'une analyse du comité des technologies nouvelles de notre institution.

*I recently interviewed Michelle Jones, MD following her thoughtful presentation on the current landscape of epilepsy in Manitoba and Winnipeg in particular. Here are some excerpts from this interview.*

**During the CLAE Congress in Winnipeg, you made an impassioned plea for more resources to advance epilepsy care in your center. Briefly could you touch on the current situation and what is urgently needed to help improve care?**

Winnipeg has a history of epilepsy excellence. Though sustained for now with human talent (epileptologists, an epilepsy neurosurgeon, EEG technologists, clinical nurses), infrastructure is needed to let these individuals properly serve the population of Manitoba (1.3 million) and its catchment areas of Northwestern Ontario, Western Nunavut and Southeastern Saskatchewan (1.5 million). Uniquely, Manitoba has the highest proportion of indigenous persons in Canada, and there is a higher incidence of epilepsy in the indigenous population. As a result, patients can wait up to three years for EMU phase I studies. For adult patients, this occurs on a makeshift orthopaedics ward. Medically refractory patients requiring intracranial EEG have to be referred out of province without an organized referral pathway. Despite inadequate resources, Manitoba also uniquely accepts patients outside the province who then need to be re-referred almost anywhere else in the country to receive standard of care.

What we urgently need is (1) an adult EMU on a neurology ward – not on orthopaedics – which is (2) capable of supporting intracranial EEG.

**Many provinces are facing difficulties funding epilepsy monitoring units or sustaining them. Do you think a national strategy could help inform the provincial health authorities in this regard? Do you see the CLAE playing a role in this conversation?**

Yes, a two-pronged national strategy will certainly help. A first prong should explicitly outline the minimum requirements of any province to provide epilepsy care, and then to tailor requirements for unique provincial attributes, such as prevalence, incidence, geography, population, and catchment. A

second prong should coordinate existing resources across Canada to allow more successful centres to help those in need, and to help those in need to learn from more successful centres.

Yes, we most definitely see the CLAE playing a role in this conversation. In other words, we fully support and endorse the CLAE's explicitly stated mandates of (1) "promoting national awareness and educating all Canadians about epilepsy and its consequences", (2) "continuing to educate physicians and stakeholders across the country through the CLAE meeting", and (3) developing the Canadian version of the International League Against Epilepsy "Out of the Shadows" campaign.

### **How can we help you achieve your goals as CLAE members?**

We believe that our goals are the same as the CLAE's advocacy mandates. Our challenges affect not just Manitoba but also the entire country, as our catchment area spans three provinces and one Arctic territory, and we often need to re-refer patients elsewhere to receive the national standard of care. We are very grateful to our fellow epileptologists, many of whom are CLAE members, for continuing to accept our patients through our time of enduring need.

Thankfully, there are already proven campaign tactics as prescribed by the World Health Organization's "Out of the Shadows" campaign, which are also endorsed by the CLAE:

- To generate 'Regional Declarations on Epilepsy' (be it Canada, Manitoba or any province), produce information on epilepsy for policy-makers, and incorporate epilepsy care into National Health Plans;
- To help organize 'Demonstration Projects' (such as workshops, epidemiologic studies, organization of focus groups with special and vulnerable populations, public education through the media) that illustrate good practice in the provision of epilepsy care.

We would like to extend an open hand to our colleagues and stakeholders in the community to help the CLAE fulfill its mandate of advocacy for not just Manitoba – but by extension – for our country as a whole.

*Submitted by Tadeu Fantaneanu, MD, Ottawa, ON.*



## Noteworthy research studies

*Dr. Trevor Steve from the University of Alberta was kind enough to answer some of our questions regarding his exciting research.*

### **1) Can you tell us about your research in a nutshell?**

My research is focused on developing methods to measure specific parts of the hippocampus (hippocampal subfields) with MRI. During my PhD we developed a new protocol to do this using ex vivo MRI and histology of cadaveric hippocampal specimens, which we recently published [Steve et al. *NeuroImage* 157:219-232 (2017) - Figure]. We have subsequently adapted our protocol to in vivo MRI using a cohort of healthy controls and patients with temporal lobe epilepsy.

### **2) What is your ultimate hope regarding the outcome of establishing a prediction model for HS? Therapeutic options in the future?**

My hope is that we can get a better understanding of what "HS subtypes" are. For various reasons, the histological literature has produced conflicting results regarding the clinical histories and surgical outcomes for patients with the different HS subtypes, and I think in vivo MRI holds a lot of potential to improve our current understanding of these entities.

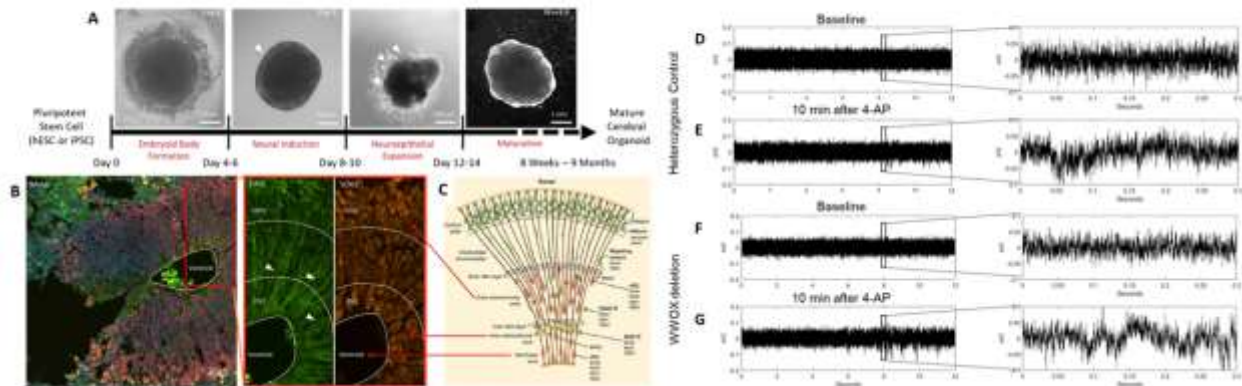
### **3) Where do you see neuroimaging in epilepsy going in the next 10 years?**

I think the "holy grail" is that we are going to start moving from group differences to looking at individual patients and how they respond to epilepsy surgery. There has been a lot of work looking at how groups of patients do over time, but I think if we could pinpoint the specific patients who will, or will not, be seizure free after surgery this would be very powerful.



Trevor Steve, MD, Edmonton, AB

We also received some updates from Dr. Peter Carlen's laboratory at UHN in Toronto, ON.



**Figure 1: (RIGHT) Human cerebral organoids generated from a pluripotent stem cell population. (A)** Overview of phenotypic changes associated with each stage of organoid development. Day 8, arrow denotes patterning of neuroepithelial tissue of exterior of post neural induction. Day 12, arrows denote expansion of neuroepithelial buds. (B) Cerebral organoids exhibit macroscopic ventricle patterning similar to the developing human brain. SOX2 positive neural progenitor cells localize around "ventricle" like structures present in cerebral organoids. TUJ1 stains axon (arrows) running perpendicular to "ventricle" like structure. (C) Organization of developing human (schematic from Liu et al., 2011. Cell, 146, 18-36). (LEFT) Sample traces from 12-week old iPSC-derived cerebral organoids (CO) at baseline and after addition of 100µM 4-Aminopyridine (4-AP), a convulsant, to induce seizure-like behaviour in immature neurons – (D) Control, Baseline, (E) Control, 10min after 4-AP, (F) WWOX KO, Baseline and (G) WWOX KO, 10min after 4-AP.

The Carlen lab recently received a grant from the U of T program on Medicine by Design entitled **“Cerebral cortical organoids: the ultimate personalized medicine for epilepsy”**. This work is also supported by Epilepsy Canada.

This is a project wherein we derive iPSCs (induced pluripotential stem cells) from a patient's skin fibroblasts or blood cells. The iPSCs are then programmed to become neurons, glia, or organoids including those looking like human cerebral cortex. We are now recording electrophysiologically from cerebral organoid brain slices derived from a child with an epileptic encephalopathy compared to tissue derived from the patient's father, with clear epileptiform activity in the patient's tissue. Once matured, this strategy will be useful for studying pathogenesis and drug responsiveness in our intractable epilepsy patients. The key members of the lab developing this technology include Mark Aquilino, Afifa Saleem, and Shanthi Mylvaganam. This project is done in collaboration with our epileptologist and genetics colleague, Dani Andrade and other basic scientists from Toronto (Cathy Barr, Roman Genov, Liliana Attisano, James Eubanks) and a group in Israel/Hadassah Medical School led by Rami Aqeilan.

## A word from the Canadian Epilepsy Alliance

### **The United States May Be Coming for Our Drugs**

The cost of medications in the United States has gotten so out of control, which Americans are resorting to extreme measures. Some are skipping doses of their medicines or taking lower doses than prescribed to make their supply last longer.

With bi-partisan support, the Trump Administration relaxed their policies on bulk importation of medication in an attempt to reduce drug costs. They want to bulk import medication from other countries that have lower prices so pharmacies can sell medications to Americans at a more reasonable rate than they currently pay. The U.S. is specifically targeting Canada's drug supply among others.

This is not a new approach, but it is picking up momentum like never before. Republicans and Democrats – including the Democratic Presidential Candidates – support this method of lowering the cost of medication in the United States. If their plan comes to fruition, it will have devastating consequences in Canada.

The United States represents almost 44% of the global pharmaceutical market, while Canada accounts for 2%.\* Canada has already struggled with drug shortages over the past several years. If the United States were to bulk import drugs from Canada, it would devastate our domestic pharmaceutical supply leading to further shortages.

The Best Medicines Coalition is an organization representing over 25 patient agencies, including Canadian Epilepsy Alliance, Canadian Mental Health Association, and Canadian Cancer Survivor Network. We are working together to protect the Canadian pharmaceutical supply.

The CEA and Best Medicines Coalition are happy to advise the U.S. government on Canadian policies that help keep prices down for consumers, but it is of utmost importance to the health and wellbeing of Canadians to prevent further drug shortages.

As this has been a concern for a long time, we can look to the recent past for possible solutions. In 2005, the Canadian Parliament introduced Bill C-83 to protect other countries from taking our drug supply and potentially causing harm to Canadians. When an election was called, the bill was shelved. However, it could prove useful as we face this pending crisis.

Once the new government is sworn in on Nov. 20<sup>th</sup>, it is important to revive, update, and pass Bill C-83. The CEA and Best Medicines Coalition will reach out to the Prime Minister and Canadian Global Affairs to address this matter.

You can help. Once the new government is sworn in, please contact your local MP and tell them how important it is to protect the Canadian pharmaceutical supply and prevent the United States from bulk importing medications from Canada.

\* Patented Medicine Prices Review Board 2017 Annual Report

*Submitted by Deirdre Floyd, on behalf of the Canadian Epilepsy Alliance*



## Updates from YES

Canada says YES!

The Canadian chapter of the Young Epilepsy Section (YES) had its kick-off event on September 20, 2019 at the Canadian League Against Epilepsy's Annual Scientific Meeting at the Fort Garry Hotel in Winnipeg Manitoba. Young professionals involved in epilepsy care and research gathered and discussed their visions on how we can shape the future of epilepsy care and research in Canada. Scientists, epileptologists, and epilepsy surgeons in various levels of training, as well as patient advocates were represented in this diverse group.

YES is an initiative of the ILAE that aims to promote young (<40) professionals such as clinical and basic scientists, nurses, physicians, students, psychologists, pharmacologists, physicists, mathematicians, and other allied health professionals pursuing a career related to epilepsy care and/or research. This initiative aims to promote the career development of people in the early stages of their career by providing mentor support, networking events and opportunities to promote epilepsy care and research on a national and international stage.

A group of approximately 25 young and young-at-heart people gathered over dinner to establish the Canadian chapter of YES. Initial priorities for the group are providing content for early career professionals at the North American Congress to be held in Toronto next year, establishing and helping promote the CLAE on social media and transitioning the CLAE junior member representative to the YES member representative.

The inaugural board was elected and is as follows:

Chair: Kristin Ikeda

Vice Chairs: Klajdi Puka and Elie Assi

Secretary: Nick Christidis

Treasurer: Jack Lam

CLAE Liaison: Jonathan Lau (non-elected)

Communications Task Force Chair: Nafisa Husein

Education Task Force Chair: Laura Gagliano

Regional Representatives:

Western (BC,AB,SK,MB): TBA

Central (ON,QC): Tamara Tavares

Atlantic (NB,NS,PE,NF): Kristin Ikeda

Official YES Chapter status is awaiting approval from the YES board. Thank you to Eisai for sponsoring the event.



*Submitted by Kristin Ikeda, MD, Halifax NS.*



## In Memoriam

*We lost many prominent, respected and well-loved colleagues over the past year and we honour the legacy they leave us.*

### **Dr. Frederick Andermann**



Dr. Frederick Andermann, one of Canada's most distinguished neurologists, passed away quietly on June 16, 2019 in Montreal at the age of 88. Loving husband and scientific collaborator of Dr. Eva Andermann (née Deutsch) for 54 years, devoted father and father-in-law of Lisa Andermann and Michael Prokaziuk, Anne Andermann and Carlos Fraenkel, Mark Andermann and Maria Lehtinen, and cherished Opapa of his grandchildren Hannah and James Prokaziuk, Lara and Ben Fraenkel, and Leila and Kaija Andermann.

For over 60 years, Dr. Andermann showed a remarkable ability to identify rare neurological syndromes and assemble multidisciplinary teams of researchers to conduct further clinical investigations to better understand these unusual presentations and to provide patients and families with hope for treatment. The results of his inquiries in such areas as cortical dysplasias, progressive myoclonic epilepsies, epilepsy surgery, and genetically determined neurological disorders have been published in nine books and over 500 scientific papers. His monographs on alternating hemiplegia, Rasmussen's syndrome, and migraine and epilepsy have contributed significantly to the understanding and treatment of these disorders. The Andermanns were also credited with having described a rare genetically-inherited autosomal recessive neurological condition associated with agenesis of the corpus callosum and peripheral neuropathy that is now known as Andermann Syndrome. Dr. Andermann was a generous and enthusiastic teacher, providing training and inspiration to generations of future epilepsy experts from all over the world.

Dr. Andermann has been recognized for his outstanding achievements, and is the winner of numerous awards and prizes, including the 1995 Distinguished Clinical Investigator Award from the American Epilepsy Society and Milken Foundation, the 1999 Penfield Award for Contribution in Outstanding Canadian Epileptology from the Canadian League Against Epilepsy, the 2003 Prix Wilder Penfield from the Province of Quebec and a 2006 Neuro Lifetime Achievement Award from the Montreal Neurological Institute and Hospital. In 2006 he was appointed as an Officer of the Order of Canada and in 2013 he received the Order of Québec. In 2011 he was recognized as a Fellow of the Royal Society of

Canada, for his distinguished work in science. He retired from clinical work and training of fellows in 2014, but continued to travel to medical conferences and publish scientific articles.

### **Michael Poulter**



It is with great sadness that we announce that Michael Poulter, former head of CERI, suddenly passed away on Saturday, August 10, 2019 after a short illness. Born in Oshawa Ontario, Michael completed a BSc in Pharmacology from the University of British Columbia and his PhD in Pharmacology from McGill University. He then did a postdoc at the NIH in Washington, followed by further postgraduate research in Strasbourg, France. In 1995 Michael returned to Canada, first at the National Research Council in Ottawa, and subsequently at the Institute for Neuroscience at Carleton University, becoming head in 2003. In 2006 Michael relocated to London, taking a position as Scientist at the Roberts Research Institute and as Professor in the Department of Physiology and Pharmacology at Western University. In addition to his science, Michael was also an avid skier, canoe tripper, sailor, a great bass player, and an excellent cook. Michael was a major contributor to epilepsy research both in fundamental science, but also as a Member of the Board and the Research Committee of Epilepsy Canada. In addition, he is the founder of a start-up, OB Pharmaceuticals, which is poised to launch human trials for a novel anticonvulsant. Michael was a dynamic, effective and passionate leader of CERI, and organized some outstanding conferences encompassing the breadth of epilepsy research. For us in the epilepsy community, he is sorely missed.

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## Upcoming Events

The International League Against Epilepsy (ILAE) is pleased to announce the 3rd International Training Course on Neuropsychology in Epilepsy to be held at the Château de Suduiraut in Bordeaux, France from 29 March - 3 April 2020. This course, sponsored by the Neuropsychology Task Force of the ILAE, is highly recommended for neuropsychologists in advancing their knowledge of neuropsychological approaches to the diagnosis and treatment of people with epilepsy. Content covers both pediatric and adult issues.

Core Course Faculty:

**Sarah Wilson (Melbourne); Sallie Baxendale (London); Gus Baker (Liverpool); William Barr (New York); Christoph Helmstaedter (Bonn); Bruce Hermann (Wisconsin); Séverine Samson (Paris); Mary-Lou Smith (Toronto)**

**Application deadline is Dec 31.**

More information can be found at the website [here!](#)

Specific questions can be addressed to the course director, Dr. Sallie Baxendale, at [s.baxendale@ucl.ac.uk](mailto:s.baxendale@ucl.ac.uk)

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### Important Congress News & Approaching Deadlines



**34th International Epilepsy Congress**  
**28 August - 1 September 2021**  
Paris, France

Due to a very high level of interest in submitting proposals, the Scientific and Organising Committee (SOC) has decided to extend the deadline for the submission of proposals for main topics and sessions to form part of the congress programme at the 34th International Epilepsy Congress in Paris in 2021. Proposals should be submitted, using the online form, no later than **Friday, 25 October 2019.**

[Submit topic proposal](#)

[Submit session proposal](#)

**Deadline for both is EXTENDED to Friday 25 October.**

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**14th European Congress on Epileptology**  
Geneva, Switzerland

**Please note date change to 5 -9 July 2020.**

[View programme.](#)

**Invitation to submit nominations for the European Epileptology Award 2020:** Any European individual who has made a substantial lifetime contribution in any aspect of epileptology is eligible for nomination. Nominations will be accepted from European ILAE Chapters, institutions, or individuals. Please note that self-nomination is not permitted.

[Information and nomination form](#)

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**11th Latin American Congress on Epilepsy**  
**22-26 May 2020**  
Medellin, Colombia

Abstracts: All researchers and practitioners are urged to consider submitting abstracts for poster or platform presentation. Deadline: 15 November 2019.

[Further information](#)

Bursaries: Assistance grants will be awarded to a limited number of applicants who have submitted an abstract to the Congress and that stands out for its scientific quality. The bursary will assist awardees with travel costs which may include registration, travel and accommodation. Deadline: 15 November 2019.

[Application and eligibility criteria](#)

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**News from Montreal, Qc**

Nous avons le plaisir de vous annoncer la tenue de deux événements au Neuro (Institut et Hôpital Neurologiques de Montréal) cet automne ainsi qu'au printemps prochain :

## **1. 1er cours de formation en médecine du sommeil** (1st National Training Course on Sleep Medicine)

Une grande proportion des patients qui se présentent dans les cliniques de neurologie souffrent de troubles du sommeil. Qu'ils soient primaires ou secondaires, les troubles du sommeil ont des conséquences importantes pour la santé et le bien-être de nos patients. Il est donc nécessaire pour le neurologue de connaître et distinguer les principaux troubles du sommeil ainsi que leurs traitements respectifs. Ce symposium, d'une durée de deux jours, couvrira les essentiels de la médecine du sommeil afin d'outiller les neurologues généralistes dans leur pratique clinique. Il s'adresse aux résidents R4 et R5 inscrits à un programme de neurologie dans un établissement Canadien ainsi qu'aux neurologues nouvellement diplômés. L'inscription est ouverte! Faites vite, les places sont limitées!

*This two-day training course is designed to provide a basic working knowledge of sleep medicine for general neurologists. The training course is for R4 and R5 residents in Canadian neurology training programs and newly board-certified neurologists.*

Lien internet : <https://www.mcgill.ca/neuro/channels/event/1st-national-training-course-sleep-medicine-300445>

Dates : 22-23 novembre 2019

Lieu : Centre de communications de Grandpré, 3801 rue Université, Montréal, Québec, H3A 2B4

## **2. Épilepsie 2020: Une vision du futur pour la recherche sur l'épilepsie** (Epilepsy 2020: A vision of the future in epilepsy research)

Joignez-vous à nous pour célébrer les carrières exceptionnelles du Dr Jean Gotman et de Dre Marilyn Jones-Gotman lors de ce symposium d'une durée de deux jours. Avec plus de 50 ans de carrière au Neuro, Jean Gotman et Marilyn Jones-Gotman ont chacun, dans leur champ d'expertise, énormément contribué à l'avancement des connaissances en épilepsie. Ce symposium soulignera leurs réalisations professionnelles remarquables de même que les nouvelles avenues de recherche en épilepsie. La Ligue Canadienne Contre l'Épilepsie organisera un souper-bénéfice le vendredi 8 mai 2020 et tous les dons iront à la création d'une bourse Jean Gotman & Marilyn Jones-Gotman de la Ligue Canadienne Contre l'Épilepsie (CLAE Jean Gotman & Marilyn Jones-Gotman Bursary) pour supporter la recherche sur l'épilepsie. Plus de détails suivront, restez à l'affût!

De plus, nous invitons les étudiants, résidents, internes et postdocs à soumettre une affiche scientifique lors de l'inscription au symposium. Les résumés doivent être soumis en format pdf (1 page maximum, simple interligne avec une ligne d'espace entre le titre/auteurs et le texte principal) et le texte ne doit pas dépasser 500 mots. La date limite pour la soumission du résumé est le 15 décembre 2019. Les résumés seront évalués par le comité scientifique et les auteurs seront avisés au plus tard le 15 janvier 2020 de l'acceptation de leur résumé.

*This symposium will highlight Professor Jean Gotman and Professor Marilyn Jones-Gotman's contributions in their field of expertise as well as focus on current topics and future trends in epilepsy. We also invite clinical and research fellows, residents, medical students, post-docs and*

graduate students to submit posters. The abstract submission deadline is December 15, 2019. Abstracts will be reviewed by the program scientific committee. Authors will be notified by whether their submission will be accepted or not by January 15, 2020. Abstracts should be limited to one page of text in pdf format and not to exceed 500 words, single spaced with a space between the title/author and the main text.

L'inscription est ouverte, ne tardez pas!

Lien internet : <https://www.mcgill.ca/neuro/channels/event/epilepsy-2020-vision-future-epilepsy-research-300406>

Dates : 8-9 mai 2020

Lieu : Amphithéâtre Jeanne Timmins, 3801 rue Université, Montréal, Québec, H3A 2B4

Envoyé par Veronique Latreille, PhD, Montréal, Qc.

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### 3rd Banff International Epilepsy Symposium (BIES) & the 23rd Western Epilepsy Workshop (WEW)

The Calgary Comprehensive Epilepsy Program at the University of Calgary (Adult and Paediatric) is organizing the 3rd Banff International Epilepsy Symposium (BIES) and the 23rd Western Epilepsy Workshop (WEW) on January 31 and February 1, 2020. Attached are the brochures for these activities. This is a unique opportunity to learn from our prestigious invited international speakers (BIES) and to share your experience and learning points from challenging cases (WEW).

If interested contact us (brochure) or send us an email ([Cynthia.Sanchez@albertahealthservices.ca](mailto:Cynthia.Sanchez@albertahealthservices.ca)).

If interested in presenting a case, please send us a brief summary with learning points to

[jp.appendino@ahs.ca](mailto:jp.appendino@ahs.ca);

[Shaily.Singh@albertahealthservices.ca](mailto:Shaily.Singh@albertahealthservices.ca); and

[Colin.Josephson@albertahealthservices.ca](mailto:Colin.Josephson@albertahealthservices.ca).

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**FRIDAY, JANUARY 31 & SATURDAY FEBRUARY 1, 2020**

Click to register or call 403-944-4242 or email [cynthia.sanchez@ahs.ca](mailto:cynthia.sanchez@ahs.ca)

Logos at the bottom: CALGARY EPILEPSY PROGRAM, Children's HOSPITAL OF ALBERTA, UNIVERSITY OF CALGARY, HISTORICAL BRAIN INSTITUTE, CLINICAL NEURO SCIENCES

## SYMPOSIUM COORDINATORS

### Dr. Samuel Wiebe

Neurologist and Professor in the Departments of Clinical Neurosciences, Community Health Sciences, and Pediatrics for the Cumming School of Medicine, University of Calgary. Director and founder of the Clinical Research Unit.

### Dr. Juan Pablo Appendino

Paediatric Neurologist - Epileptologist at the Alberta Children's Hospital. Clinical Associate Professor in the Department of Pediatrics, Cumming School of Medicine, University of Calgary.

### Dr. Collin Josephson

Neurologist and Assistant Professor in Departments of Clinical Neurosciences and Community Health Sciences, Cumming School of Medicine, University of Calgary. Member of the O'Brien Institute of Public Health and Hotchkiss Brain Institute.

### Dr. Shally Singh

Neurologist and Clinical Assistant Professor, Department of Clinical Neurosciences, Cumming School of Medicine, University of Calgary.

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FRIDAY, JANUARY 31, 2020

A row of colorful silhouettes of people in various poses, representing a diverse group of individuals.