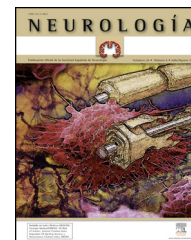




NEUROLOGÍA

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CONSENSUS STATEMENT

The Spanish Society of Neurology's official clinical practice guidelines for epilepsy[☆]



J.M. Mercadé Cerdá^{a,*}, M. Toledo Argani^b, J.A. Mauri Llerda^c, F.J. López Gonzalez^d,
X. Salas Puig^b, J. Sancho Rieger^e

^a Hospital Regional Universitario Carlos Haya, Málaga, Spain

^b Hospital Universitari Vall d'Hebron, Barcelona, Spain

^c Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain

^d Complejo Hospitalario Universitario de Santiago, Santiago de Compostela, A Coruña, Spain

^e Consorcio Hospital General Universitario, Valencia, Spain

Received 13 November 2013; accepted 29 December 2013

Available online 9 March 2015

KEYWORDS

Clinical practice
guidelines in
epilepsy;
Seizure emergencies;
First seizure;
Unfavourable
outcome in epilepsy;
Status epilepticus

Abstract Previous official clinical practice guidelines (CPGs) for epilepsy were based on expert opinions and developed by the Epilepsy Study Group of the Spanish Society of Neurology (GE-SEN).

The current CPG in epilepsy is based on the scientific method, which extracts recommendations from published scientific evidence. Reducing variability in clinical practice through standardisation of medical practice is its main function.

Scope and objectives: This CPG focuses on comprehensive care for individuals affected by epilepsy as a primary and predominant symptom, regardless of the age of onset and medical policy.

Methodology: (1) Creation of a working group of GE-SEN neurologists, in collaboration with neuropsychiatrists, neurophysiologists and neuroradiologists. (2) Identification of clinical areas to be covered: diagnosis, prognosis and treatment. (3) Search and selection of the relevant scientific evidence. (4) Formulation of recommendations based on the classification of the available scientific evidence.

Results: The CPG contains 161 recommendations of which 57% were established by consensus between authors and publishers, due to significant lack of awareness of this disorder in many fields.

Conclusions: This epilepsy CPG formulates recommendations based on explicit scientific evidence as a result of a formal and rigorous methodology, according to the current knowledge in the pre-selected areas.

[☆] Please cite this article as: Mercadé Cerdá JM, Toledo Argani M, Mauri Llerda JA, López Gonzalez FJ, Salas Puig X, Sancho Rieger J. Guía oficial de la Sociedad Española de Neurología de práctica clínica en epilepsia. Neurología. 2016;31:121–129.

* Corresponding author.

E-mail address: juanmercade@gmail.com (J.M. Mercadé Cerdá).

PALABRAS CLAVE

Guía de práctica clínica en epilepsia; Urgencias en crisis epilépticas; Primera crisis epiléptica; Evolución desfavorable de una epilepsia; Estados epilépticos

This paper includes the CPG chapter dedicated to emergency situations in seizures and epilepsy. These may present as a first seizure, an unfavourable outcome in a patient with known epilepsy, or status epilepticus (SE) as the most severe manifestation.

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Guía oficial de la Sociedad Española de Neurología de práctica clínica en epilepsia

Resumen Las anteriores Guías oficiales de práctica clínica en epilepsia elaboradas por el Grupo de Estudio de Epilepsia de la Sociedad Española de Neurología (GE-SEN) estaban basadas en la opinión de expertos.

La actual Guía de práctica clínica (GPC) en epilepsia se basa en el método científico que extrae recomendaciones a partir de evidencias científicas constatadas. Su principal función es disminuir la variabilidad de la práctica clínica a través de la homogeneización de la práctica médica.

Alcance y objetivos: Esta GPC se centra en la atención integral de personas afectadas por una epilepsia, como síntoma principal y predominante, independiente de la edad de inicio y ámbito asistencial.

Metodología: 1) Constitución del grupo de trabajo integrado por neurólogos del GE-SEN, con la colaboración de neuropediatras, neurofisiólogos y neurorradiólogos; 2) determinación de los aspectos clínicos a cubrir: diagnóstico, pronóstico y tratamiento; 3) búsqueda y selección de la evidencia científica relevante; 4) formulación de recomendaciones basadas en la clasificación de las evidencias científicas disponibles.

Resultados: Contienen 192 recomendaciones. El 57% son de consenso entre autores y editores, como consecuencia del desconocimiento en muchos campos de esta patología.

Conclusiones: Esta GPC, en epilepsia, con una metodología formal y rigurosa en la búsqueda de evidencias explícitas donde ha sido posible, formula recomendaciones extraídas de las mismas.

En este artículo incluimos el capítulo de la GPC dedicado a situaciones de urgencia en crisis epilépticas y epilepsia, que pueden presentarse como una primera crisis epiléptica, una evolución desfavorable en un paciente con una epilepsia conocida o en su forma más grave como un estado epiléptico.

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Introduction

Epilepsy refers to a heterogeneous array of highly prevalent illnesses, and it is regarded as one of the most common reasons for neurological consultation. Epilepsy may be defined as a brain disorder characterised by a long-term predisposition to epileptic seizures (ES), and by the neurobiological, cognitive, psychological, and social consequences of that disorder. Diagnosis must be preceded by at least one ES. This is one of the diseases with the greatest impact on patients' quality of life.

The Epilepsy Study Group of the Spanish Society of Neurology (GE-SEN) has published two previous editions of the official guidelines for the diagnosis and treatment of epilepsy. These guidelines were fundamentally based on expert opinion. The current guidelines, drawn up during 2012, are based on the scientific method, which uses confirmed evidence to formulate recommendations.

This study group comprises 47 epilepsy experts, including neurologists, neurophysiologists, neuroradiologists, and paediatric neurologists. The Guidelines were coordinated by five editors under a general director.

Recommendations for searching and selecting applicable scientific evidence are described below.

1. Selective keyword search on PubMed-MEDLINE, using scientific evidence filters to select meta-analyses and controlled clinical trials.
2. Other search engines used to gather evidence:
 - Tripdatabase (www.tripdatabase.com).
 - Cochrane Library/Cochrane Library Plus (<http://www.update-software.com/Clibplus/Clibplus.asp>).
 - Search engines for treatment data: DARE (<http://www.crd.york.ac.uk/crdweb>).
 - For prognoses and aetiology: EMBASE (<http://www.embase.com>).
3. Information from other clinical practice guidelines (CPGs) or recommendations by medical societies: American Academy of Neurology, National Institute for Health and Clinical Excellence, Scottish Intercollegiate Guidelines Network, International League Against Epilepsy, European Federation of Neurological Societies (EFNS), *Guía oficial para el diagnóstico y tratamiento de la epilepsia SEN 2008*, and *Guía andaluza de epilepsia 2009*. The study group adheres to the 2004 EFNS instructions for classifying scientific evidence (Table 1).¹
4. For prognostic studies, we used a modified version of the evidence grading system promoted by the Oxford Centre for Evidence-Based Medicine.

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