SNOMED CT Web Series





Dr. Lynette Sadleir, Professor, University of Otago, Wellington (NZ) SNOMED CT and Epilepsy: New International League Against Epilepsy seizure and epilepsy classifications

November 17, 2021 | 19:00 UTC



Julie – 2 years old

- Presents with multiple daily events
- Normal development
- Normal examination
- No family history

Julie – 8 years old

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EPILEPSY and SNOMED



- 1. Epilepsy
- 2. International League Against Epilepsy (ILAE)
- 3. ILAE classification history, process and progress
- 4. ILAE Position Papers: new concepts and terminology
- Rationale for evolution of terms and concepts: absence seizures
- 6. SNOMED ILAE collaboration

Epileptic Seizure

A transient occurrence of signs and/or symptoms due to abnormal excessive or synchronous neuronal activity in the brain.





Epilepsy Syndrome:

A characteristic cluster of clinical and EEG features, often supported by specific etiological findings.

AGE OF MRI & **SEIZURES** ONSET EEG **TYPES Epilepsy** Syndrome **DEVELOPMENT EXAMINATION COMORBIDITIES**

Why are epilepsy syndromes important?



Guide investigations



Provide prognosis: seizure and comorbitidies



Provide aetiological information



Guide management



Enable effective research

"Epilepsy is the most common serious brain disorder worldwide with no age, racial, social class, national, nor geographic boundaries."

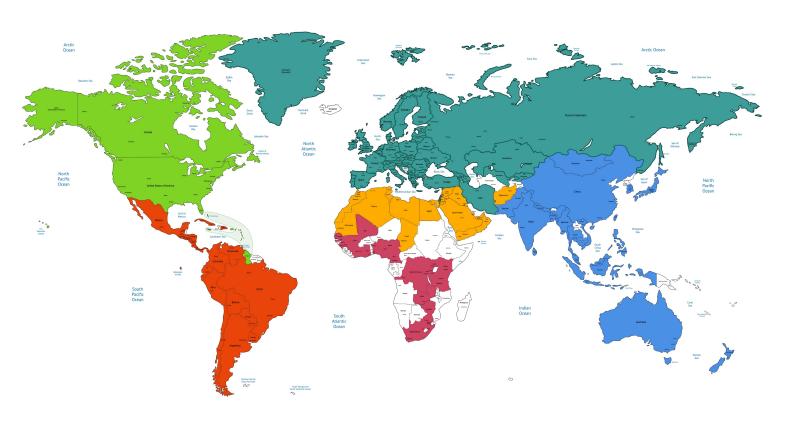




The World's preeminent association of health care professionals and scientists working toward a world where no person's life is limited by epilepsy

Established in 1909

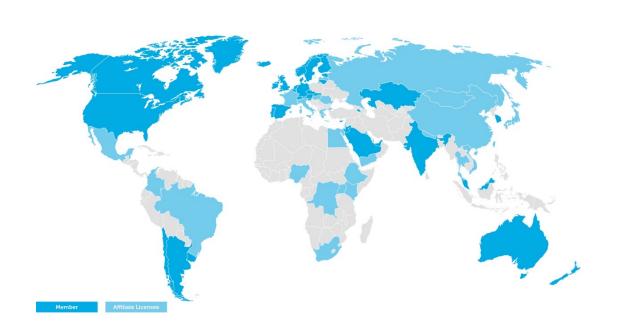
International League Against Epilepsy

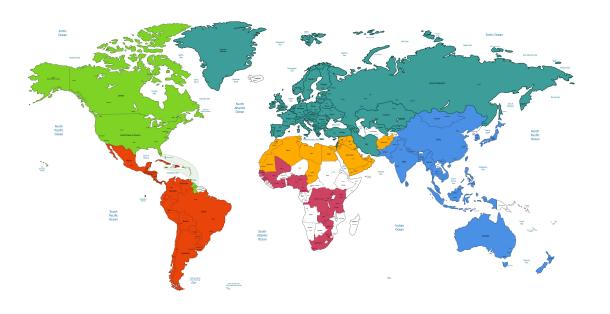




Leading healthcare terminology, worldwide









Leading healthcare terminology, worldwide



Goal is to enhance the content related to seizures and epilepsy in SNOMED CT to ensure clinicians have the latest evidence-based content available to them for point of care recording.

Terminology and Classification of the Epilepsies



Purpose: for clinical diagnosis

Transparent language: words that mean what they say

Previous ILAE Classification and Terminology Publications

1970: Clinical and EEG Classification of Epileptic Seizures

1981: Revised Clinical and EEG Classification of the Epileptic Seizures

1985: Classification of Epilepsies and Epileptic Syndromes

1989: Revised Classification of Epilepsies and Epileptic Syndromes

2010: Revised terminology and concepts for organization of seizures and

epilepsies





nal of the International League Against Epilepsy



ILAE Position Paper Process

Executive

Publication

ILAE Position Papers: Commission for Classification and Terminology

2014: A practical and clinical definition of Epilepsy

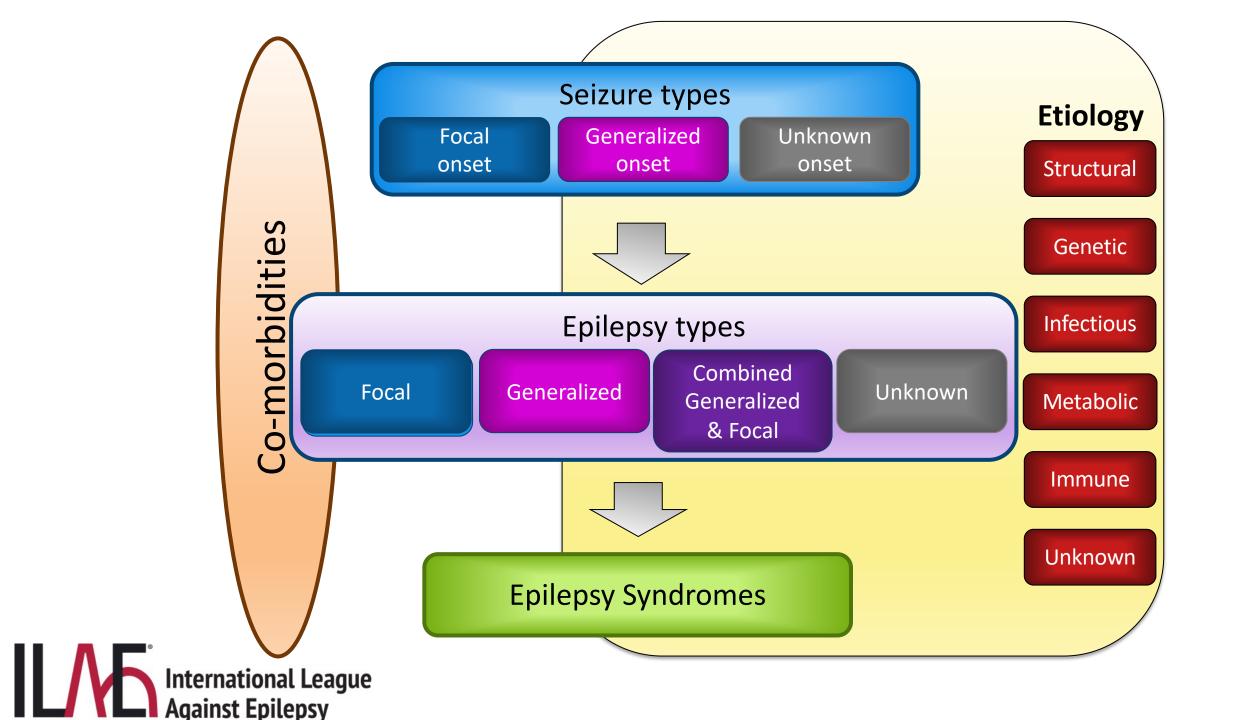
2017: Operational classification of seizure types

2017: Classification of the epilepsies

2020: Modifications for seizures in the neonate

2022: Classification & definitions of epilepsy syndromes

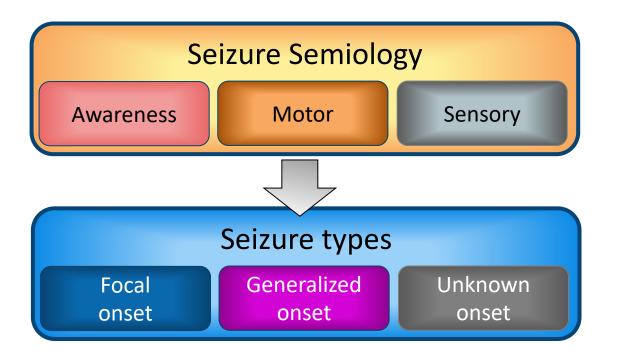




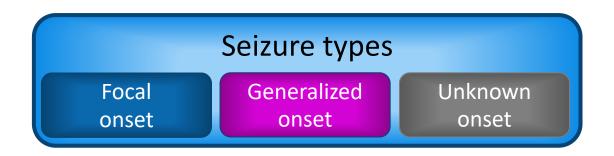








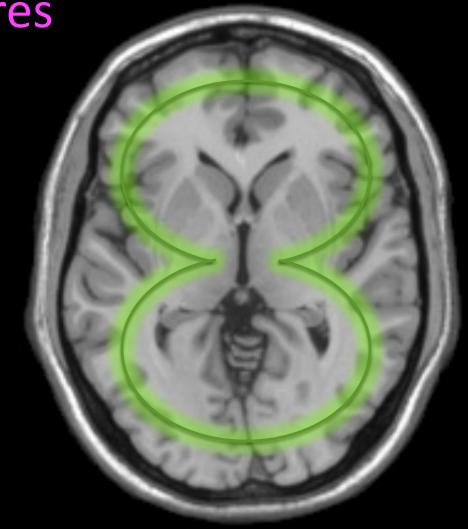


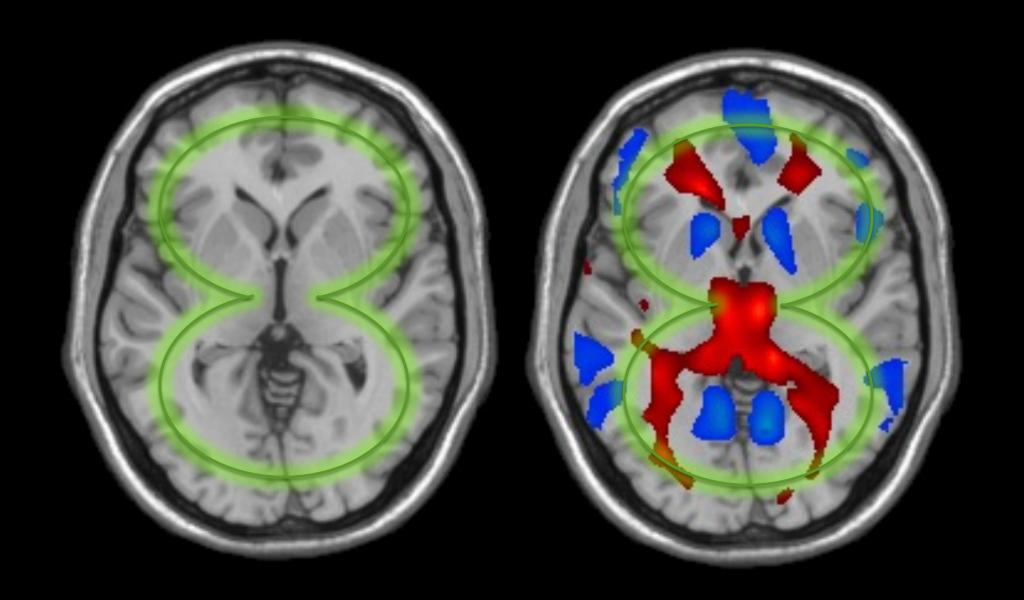




Generalized seizures

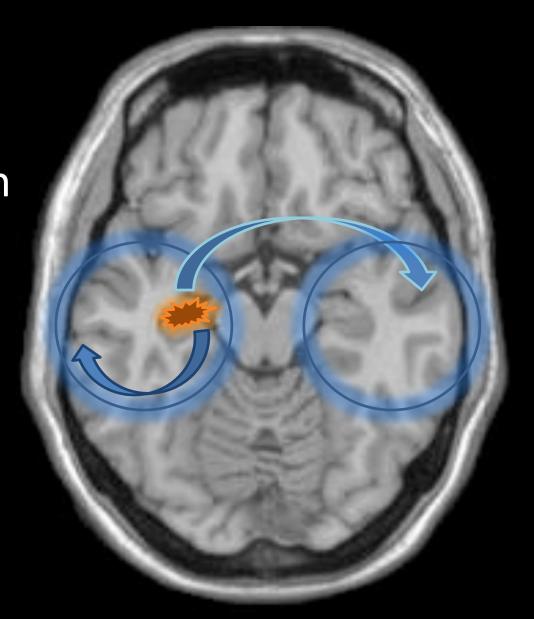
 Originate at some point within and rapidly engage bilaterally distributed networks

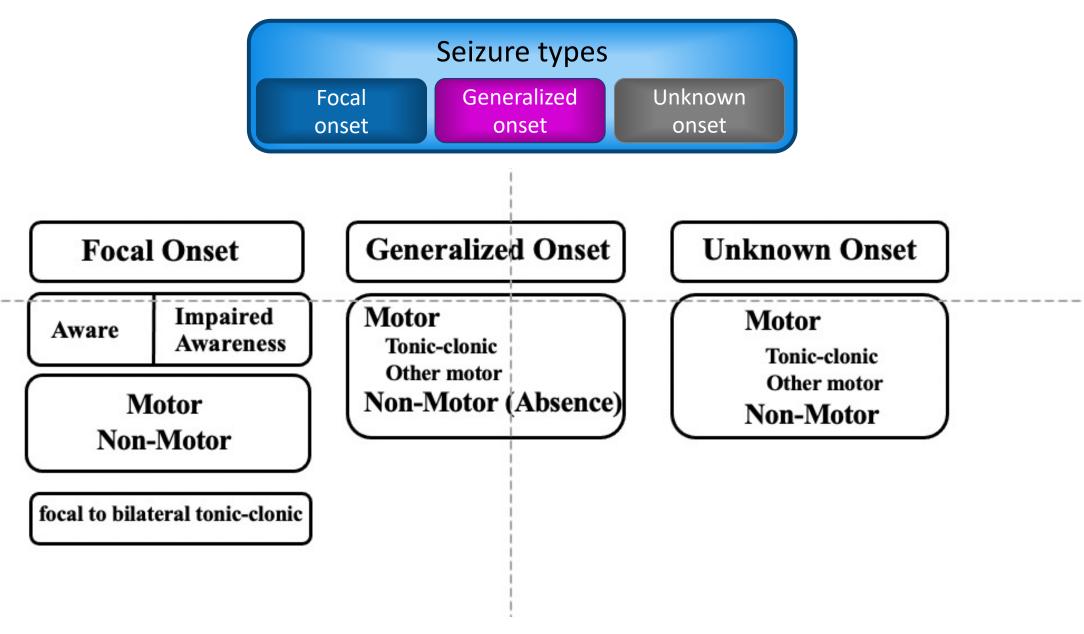




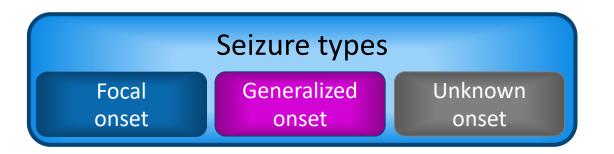
Focal seizures

 Originate within networks limited to one hemisphere









Focal Onset

Aware

Impaired Awareness

Motor Onset

automatisms atonic clonic epileptic spasms hyperkinetic myoclonic tonic

Non-Motor Onset

autonomic behavior arrest cognitive emotional sensory

Generalized Onset

Motor

typical atypical

myoclonic

eyelid myoclonia

tonic-clonic
clonic
tonic
myoclonic
myoclonic-tonic-clonic
myoclonic-atonic
atonic
epileptic spasms
Non-Motor (absence)

Unknown Onset

Motor

tonic-clonic
epileptic spasms
Non-Motor
behavior arrest

International League Against Epilepsy

focal to bilateral tonic-clonic

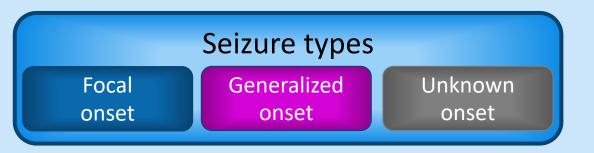
Terms no longer in use

- Complex partial
- Simple partial
- Partial
- Psychic
- Dyscognitive
- Secondarily generalized tonic-clonic











SNOMED International

DISORDER



Generalized

Focal

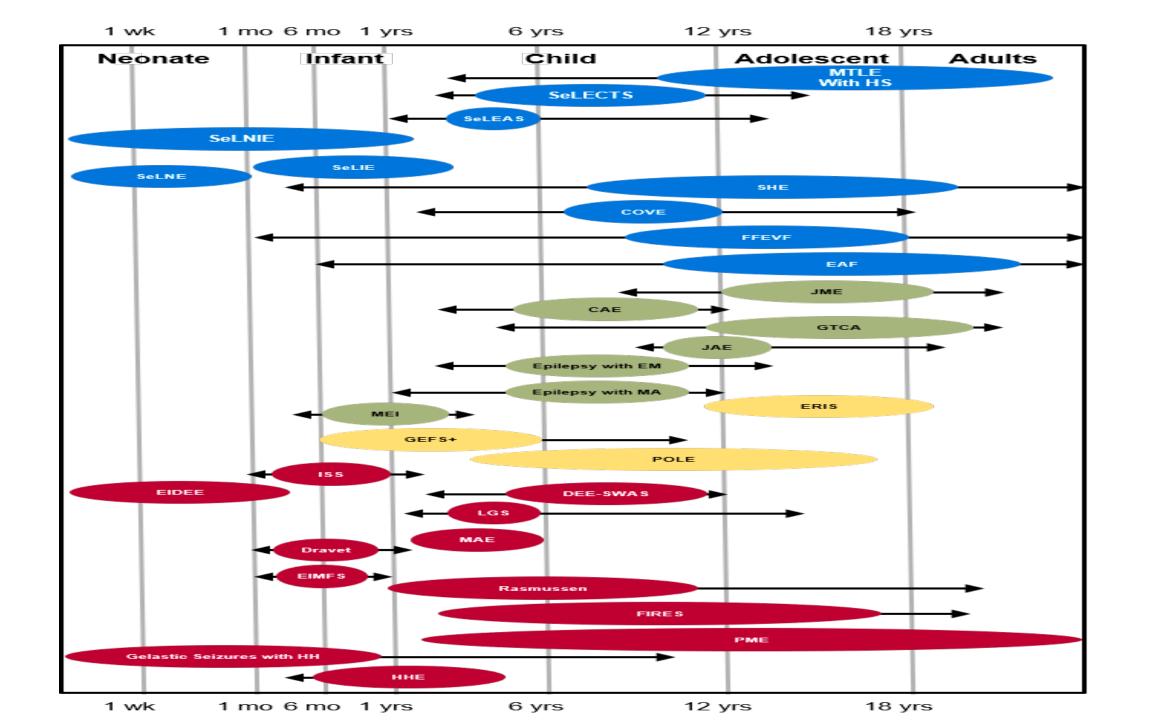
Combined Generalized & Focal

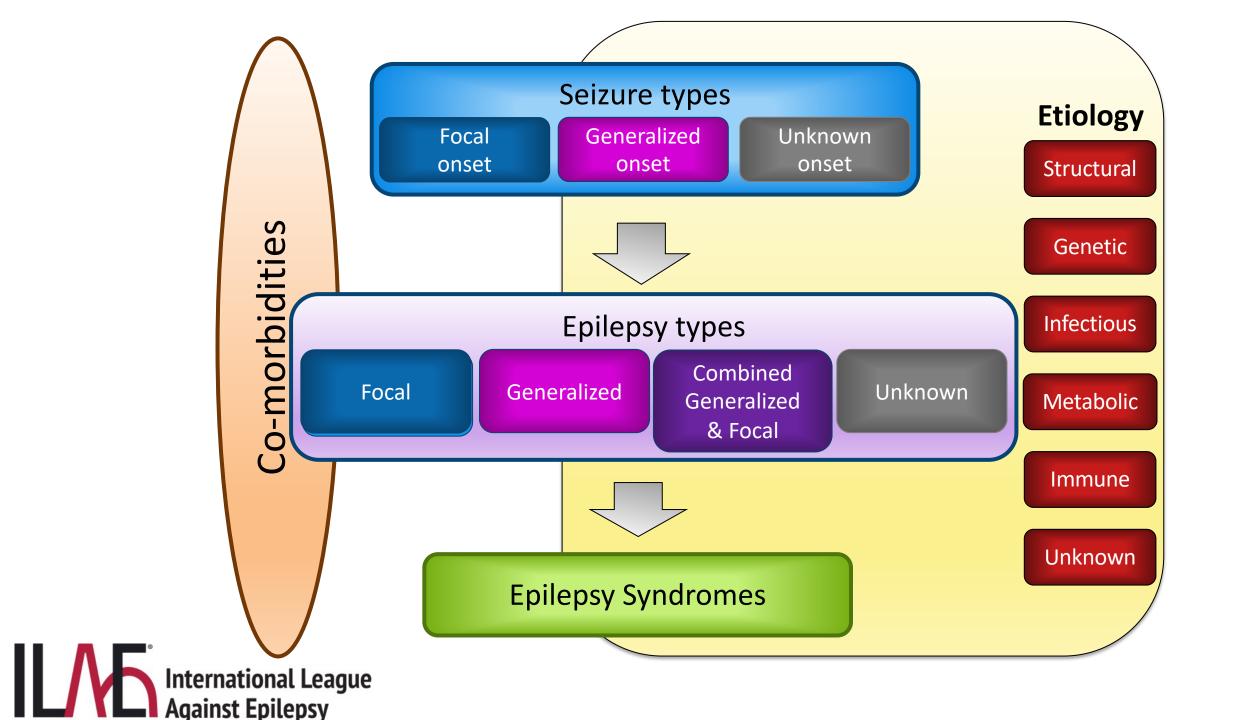
Unknown



Epilepsy Syndromes



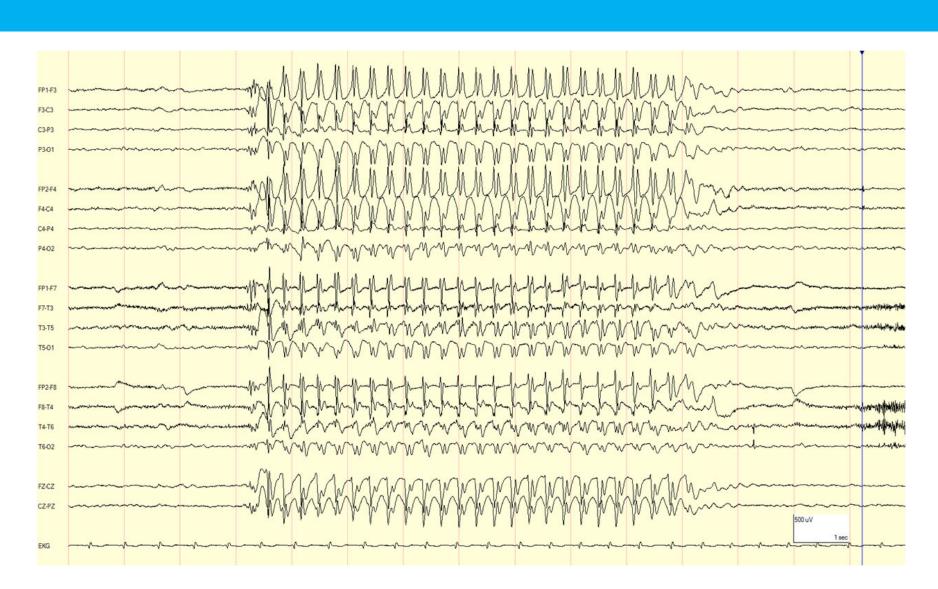




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- Normal development
- Normal examination
- No family history

Julie – 2 years old



Julie – 8 years old

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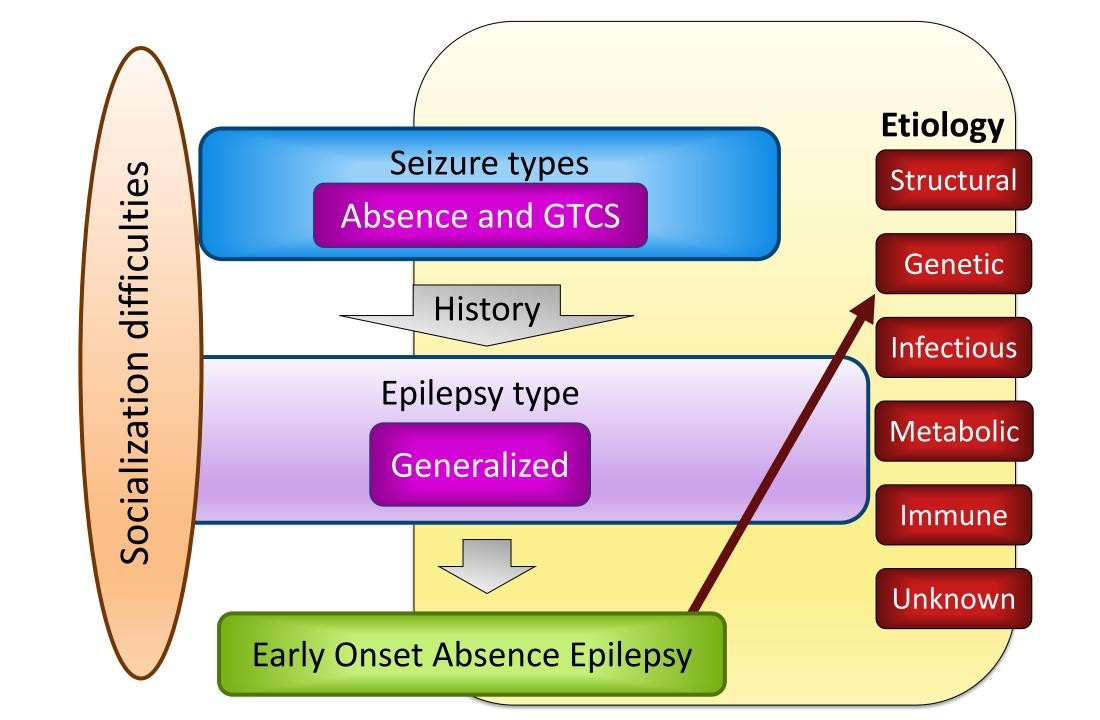
Julie – 8 years old

Seizure type

Typical Absence and GTCS

Julie – 12 years old

- Seizures
 - 2 years: infrequent typical brief absence seizures
 - 8 years: Absence status and GTCS
- Normal development and examination
- No family history
- EEG generalised spike wave and polyspike wave
- MRI normal



Julie – 8 years old

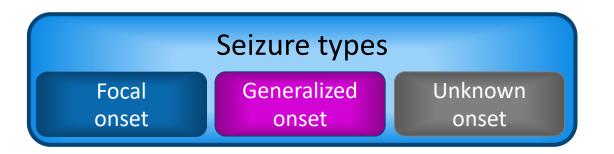
SLC2A1 pathogenic variant

GLUT1 deficiency

Precision therapy: Ketogenic diet

Rationale for evolution of terminology and concepts

ABSENCE SEIZURES



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Impaired Awareness

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International League Against Epilepsy

focal to bilateral tonic-clonic

Observation of events

1705: Poupart published first description

1815: Esquirol introduced "Petit Mal"

1824: Calmeil used "absence"

EEG

1933: Berger described 3 hz spike and wave

Prior to 1963

Petit Mal

Petit Mal Variant

1964

Petit Mal (typical absence)

Petit Mal Variant (atypical absence)

Observation of events

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EEG

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Video-telemetry monitoring

1969, 1975 Penry; 1974 Browne; 1981 Stefan: described semiology in detail

1970 Classification

SIMPLE ABSENCES

COMPLEX ABSENCES

+ mild clonic components

+ increased tone

+ decreased tone

automatisms

+ autonomic phenomena

1970 Classification

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+ mild clonic components

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+ autonomic phenomena

1981 Classification

ABSENCE SEIZURES

+ mild clonic movements

+ tonic components

+ atonic components

+ automatisms

+ autonomic components

ATYPICAL ABSENCE SEIZURES

Observation of events

1705: Poupart published first description

1815: Esquirol introduced "Petit Mal"

1824: Calmeil used "absence"

EEG

1933: Berger described 3 hz spike and wave

Video-telemetry monitoring

1969, 1975 Penry; 1974 Browne; 1981 Stefan: described semiology in detail

Video-EEG

1987 Holmes; **1989** Panayiotopoulos; **1994** Hirsch; **2001**

Capovilla; 2006 Sadleir: described relevance of

semiological features

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ATYPICAL ABSENCE SEIZURES

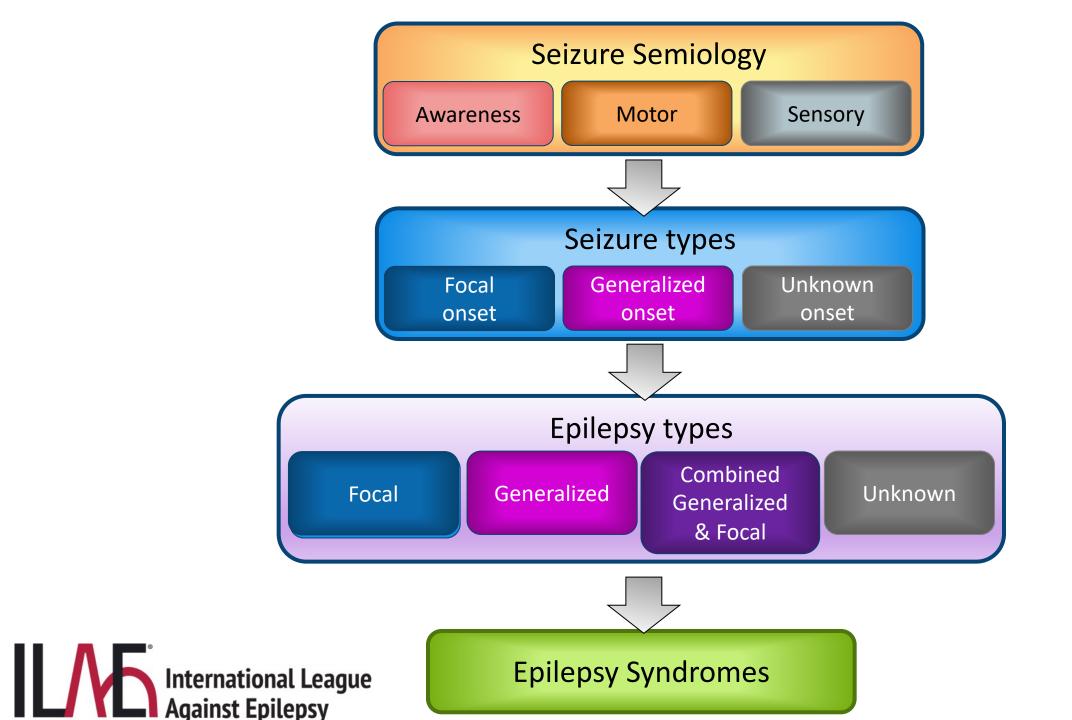
2017 Classification

TYPICAL ABSENCE SEIZURES

MYOCLONIC ABSENCE

ABSENCE WITH EYELID MYOCLONIA

ATYPICAL ABSENCE SEIZURES



Automatisms

"A more or less coordinated repetitive motor activity usually occurring when cognition is impaired and for which the subject is amnesic afterwards"

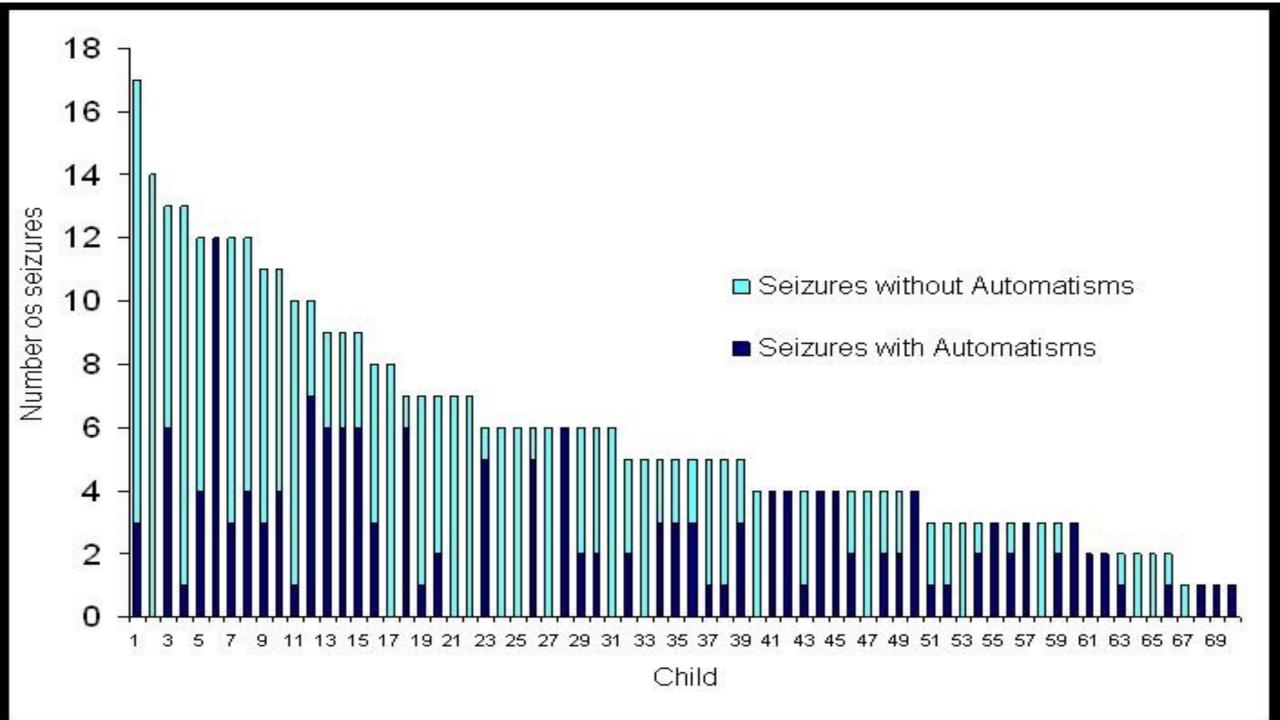
Common

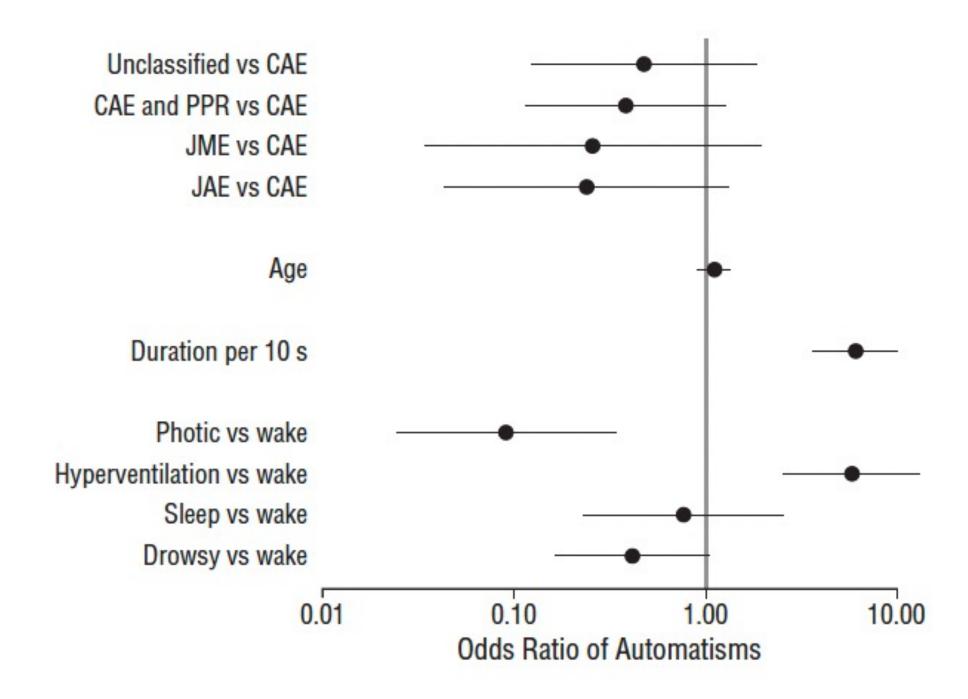
- Up to 63% of absence seizures
- Up to 100% of children.
- Up to 67% of children have automatism in every seizure

Absence video-EEG study

- New onset absence seizures
- 70 children (1 to 16 years)
- Syndromes: Childhood Absence Epilepsy, Juvenile Absence Epilepsy, Juvenile Myoclonic Epilepsy
- 509 absence seizures
- States: Awake, drowsy and sleep
- Provocation: Photic stimulation, Hyperventilation

Sadleir et al.





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ABSENCE SEIZURES

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ATYPICAL ABSENCE SEIZURES

2017 Classification

TYPICAL ABSENCE SEIZURES

MYOCLONIC ABSENCE

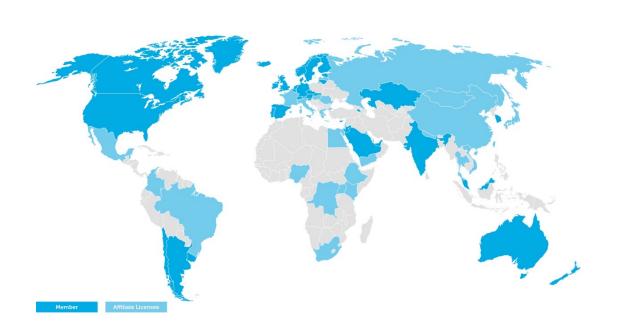
ABSENCE WITH EYELID MYOCLONIA

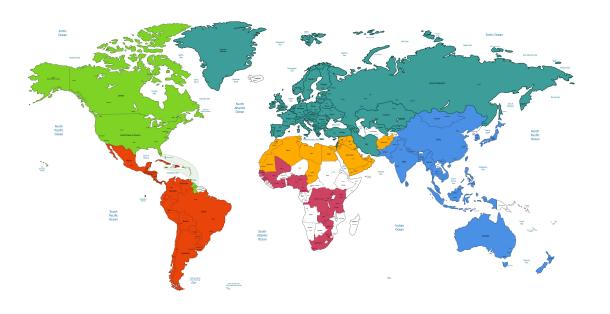
ATYPICAL ABSENCE SEIZURES



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Plan:

- Add new seizure type and epilepsy syndromes terminology
- Inactivate seizure and epilepsy terminology which is outdated and not helpful
- Organise seizure and epilepsy terminology relationships in a conceptual way which makes sense with our present understanding of seizures and epilepsy

EPILEPSY and SNOMED



- Epilepsy is a group of disorders (syndromes) defined predominantly (but not only) by seizure types
- 2017, 2020, 2022: ILAE introduced new concepts and terminology
- Changes reflect advances in understanding and use understandable words
- SNOMED ILAE collaboration will add new terminology, inactivate unhelpful terminology, realign terminology in SNOMED



