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Oral Presentation

Psychic and Cognitive Presentations in Patients with Epilepsy

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Abstract

Psychic and cognitive presentations in patients with epilepsy can present as aura or as a symptoms/sign in cases with psychological morbidities as well as in some ictal or postictal phases of seizures, that may be mistaken with psychiatric disorders or psychogenic seizure. Psychic auras may be dysphasic, dysmnesic (flashback, hypermnesia, panoramic recall, amnestic syndrome, fabrication), perceptive/cognitive (depersonalization, derealization, forced thinking) or altered consciousness (dreamy or aneroid state, twilight, fugue or trance), illusion/hallucinations, palinopsia, autoscopy or mirror phantom as well as affective in nature. On the other hand, in some studies one third of epileptic patients had a history of major depression and an equal number had symptoms of anxiety, but psychotic symptoms were found only in 10% of patients. Schizophrenic-like syndrome was also reported. Behavioral alterations, cognitive inability, personality changes, tripled increased risk of suicide, diminished sexual interest and sleep disorders are other comorbidities in epileptic cases. Finally, some epileptic seizures (such as those arised from SSMA, fronto-orbital, temporal and cingulate gurus, eyelid myoclonia with absence or Jeavons syndrome) may have manifestations that can easily be confused with pseudo-seizure or other psychogenic disorders. In this lecture we will discuss this issues in details.

Keywords: Psychic/Cognitive Symptoms; Epilepsy.

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