Common Pitfalls in Pediatric Long-Term Video-EEG Monitoring

Mahmoud Mohammadi*

Children’s Medical Center Hospital, Tehran University of Medical Sciences, Tehran, Iran

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Abstract

After introduction of electroencephalography as a real-time mean of study on human brain in early 20’s, this technology has an important role in diagnosis, classification and management of epileptic disorders in pediatric age group. This role has been emphasized after introduction of Simultaneous Video-EEG monitoring in 60’s. After that, our knowledge and attitude had been changed regarding epilepsy, especially in children and newborns. There are some important pitfalls in doing and reading video-EEG monitoring. Knowing and paying attention to these pitfalls will help us in better dealing with epileptic disorders in children. In my short talk, I will address to the following points;

- Having clear and measurable objective for doing VEEG
- Inadequate or inappropriate structure and/or equipment
- Inappropriate or inadequate job descriptions and unqualified personnel
- Only paying attention to “push-buttons”
- Being inattentive to “seizure semiology”
- “every seizure has a clear scalp electrographic counterpart”
- Labeling patient as having “psychogenic seizures”
- Having no protocol for every patient as well as tapering AEDs

Keywords: Video-EEG Monitoring, VEEG, Epilepsy in Children, Diagnostic Pitfalls, Pediatric EMU.

*Corresponding Author: Mahmoud Mohammadi
E-mail: Mahmoh365@yahoo.com