

عنوان مقاله:

Sleep and Epilepsy

محل انتشار:

پانزدهمین کنگره بین المللی صرع ایران (سال: 1397)

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خلاصه مقاله:

About 1 % to 2 % of the population has epilepsy, and 1 out of 10 people will have a seizure during their lifetime. Approximately 20 % of patients with epilepsy will have seizures solely while asleep. Nocturnal seizures should be distinguished from other nocturnal events such as parasomnias. Sleep disorders such as sleep deprivation and sleep apnea may exacerbate, seizures, and conversely, seizures may affect sleep, as many of the current antiepileptic drugs produce undesirable side effects to sleep architecture and may predispose the patient to primary sleep disorders. Non-REM (NREM) sleep is most epileptogenic owing to the relative synchrony of thalamo-cortical synaptic activity and the greater ease of propagation discharges. Diagnosis of sleep- related seizures may be considered if the following elements of present: 1) The patient has a history epilepsy, even if the epilepsy is well controlled; 2) The patient experiences stereotyped events that are repetitive and the patient's bedpartner. Episodes occur at any time of night (more commonly during NREM sleep than during REM sleep). Similar events may occur during the day. A trail of antiepileptic drugs produces a favorable response. Obstructive Sleep Apnea and Epilepsy : Sleep apnea may coexist with epilepsy. Several potential mechanisms of action have been proposed as to the etiology of seizure facilitation in obstructive sleep apnea (OSA). Prolonged asystole which may occur in OSA may be associated with seizure. Some have proposed that sleep deprivation resulting from frequent arousals increases neuronal excitability. The treatment of .OSA may improve seizure control daytime sleepiness or both

کلمات کلیدی:

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