

Up to one third of [epilepsy](#) patients develop pharmacoresistant seizures and many benefit from resective surgery. However, patients with non-lesional focal epilepsy often require intracranial monitoring to localize the seizure focus. Intracranial monitoring carries operative morbidity risk and does not always succeed in localizing the seizures, making the benefit of this approach less certain.

Intracranial monitoring is favored over [VNS](#) and medical management in young and elderly patients over a wide, clinically-relevant range of pertinent model variables such as the chance of localizing the seizure focus and the surgical morbidity rate <sup>1)</sup>.

<sup>1)</sup>

Hotan GC, Struck AF, Bianchi MT, Eskandar EN, Cole AJ, Westover MB. Decision analysis of intracranial monitoring in non-lesional epilepsy. *Seizure*. 2016 Jun 18;40:59-70. doi: 10.1016/j.seizure.2016.06.010. [Epub ahead of print] PubMed PMID: 27348062.

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