

Status epilepticus (SE)

- Kininogen enhances seizure susceptibility in mice possibly through bradykinin-induced modulation of calcium transients in glutamatergic and GABAergic neurons
 - Ketamine in Status Epilepticus: How Soon Is Now?
 - Cystamine reduces neurodegeneration and epileptogenesis following soman-induced status epilepticus in rats
 - Unveiling the Psychiatric and Neurological Manifestations of Idiopathic Hypoparathyroidism: A Case of Auditory Hallucinations and Seizure Disorder
 - Benzodiazepine-resistant epilepsy: unraveling molecular mechanisms and developing multimodal therapeutic strategies
 - Atypical Cause of Autoimmune Encephalitis: The Role of Mycoplasma pneumoniae in Status Epilepticus
 - Anti-shivering Drug Influences the Characteristics of Electroencephalographic Shivering Noise During Targeted Temperature Management: A Case Report
 - Experience of the First Epilepsy Monitoring Unit in South Dakota
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Status epilepticus is a medical emergency with [seizure](#) activity lasting five minutes or longer ¹⁾.

This can be either one continuous seizure or multiple repetitive seizures with no recovery of [consciousness](#) in between ²⁾.

Key concepts

- definition: seizure > 5 mins, or persistent seizure after 1st & 2nd line [AEDs](#)
- morbidity and mortality are high in untreated [status epilepticus](#) (SE)
- most common etiology: patient with known [seizure](#) disorder with low AED levels
- de novo SE in acute illness is considered a manifestation of the illness which should be treated at the same time as the SE

Definition

Status epilepticus (SE) is an [epileptic seizure](#) of greater than five minutes or more than one [seizure](#) within a five minute period without the person returning to normal between them.

Classification

Status epilepticus can either be of the [tonic clonic seizure](#) type with a regular pattern of contraction

and extension of the arms and legs or of types that do not involve contractions such as absence seizures or complex [partial seizures](#). Status epilepticus is a life-threatening condition particularly if treatment is delayed.

Status epilepticus may occur in those with a history of [epilepsy](#) as well as those with an underlying problem of the [brain](#).

These underlying brain problems may include trauma, infections, or strokes among others.

[Refractory status epilepticus](#)

Diagnosis

Diagnosis often involves checking the blood sugar, imaging of the head, a number of blood tests, and an electroencephalogram. Psychogenic nonepileptic seizures may present similarly. Other conditions that may also appear to be SE include: [hypoglycemia](#), [movement disorders](#), [meningitis](#), and [delirium](#) among others.

Treatment

[Status epilepticus treatment](#).

Complications

Status epilepticus can include both [generalized seizure](#) and [partial seizures](#) and has a high potential to cause [brain injury](#) so it, therefore, requires immediate drug therapy

Outcome

see [Status epilepticus outcome](#).

Status epilepticus in pregnancy

Status epilepticus in pregnancy poses a tremendous threat to both mother and fetus, making a correct diagnosis and treatment a challenging task for clinicians.

Pregnancy-associated SE is rare and predominantly occurs in patients without a history of epilepsy. An autoimmune etiology should be considered in pregnant patients with de novo SE, which was associated with poor outcomes. Thorough investigations and prompt treatment according to the etiology may be required to improve the final outcomes of both mother and fetus ³⁾.

Case series

see [Status epilepticus case series](#).

1)

S. A. Mayer, J. Claassen, J. Lokin, F. Mendelsohn, L. J. Dennis, and B. F. Fitzsimmons, "Refractory status epilepticus: frequency, risk factors, and impact on outcome," *JAMA Neurology*, vol. 59, no. 2, pp. 205-210, 2002.

2)

R. D. Kilbride, A. S. Reynolds, J. P. Szafarski, and L. J. Hirsch, "Clinical outcomes following prolonged refractory status epilepticus (PRSE)," *Neurocritical Care*, vol. 18, no. 3, pp. 374-385, 2013.

3)

Lu YT, Hsu CW, Tsai WC, Cheng MY, Shih FY, Fu TY, Chuang YC, Tsai MH. Status epilepticus associated with pregnancy: A cohort study. *Epilepsy Behav*. 2016 Apr 23;59:92-97. doi: 10.1016/j.yebeh.2016.03.034. [Epub ahead of print] PubMed PMID: 27116537.

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Last update: **2024/06/07 02:50**