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Benign occipital epilepsies of childhood: clinical features and genetics

Isabella Taylor^{1,2}, Samuel F. Berkovic^{1,2,3}, Sara Kivity⁴ and Ingrid E. Scheffer^{1,2,3,5}

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Correspondence to: Prof. Ingrid E. Scheffer, Epilepsy Research Centre, Level 1, Neurosciences Building, Austin Health, Banksia Street, West Heidelberg, Victoria 3081, Australia E-mail: scheffer@unimelb.edu.au

The early and late benign occipital epilepsies of childhood (BOEC) are described as two discrete electro-clinical syndromes, eponymously known as Panayiotopoulos and Gastaut syndromes. Our aim was to explore the clinical features, classification and clinical genetics of these syndromes using twin and multiplex family studies to determine whether they are indeed distinct. Sixteen probands including seven twins were studied. Non-twin probands ($n = 9$) with a family history of epilepsy were included. Electroclinical seizure semiology was characterized and probands were classified into BOEC syndromes. Detailed phenotyping of relatives was performed and phenotypic patterns within families were analysed. One-third of the children in this selected series of BOEC did not have a pure syndrome, rather a mixed syndrome with features of both Panayiotopoulos and Gastaut syndromes. Monozygotic twin pairs did not show a higher concordance rate than dizygotic twin pairs suggesting that BOEC may not be a purely genetic disorder. In relatives with epilepsy, there was a mixed pattern of focal and generalized epilepsies with focal epilepsies predominating. BOEC is an electro-clinical spectrum with Panayiotopoulos and Gastaut syndromes at either end; many cases show mixed features. Clinical genetic studies highlight the multifactorial aetiology of BOEC as monozygotic twins have low concordance suggesting that non-conventional genetic influences or environmental factors play a major role. Family studies show both focal and generalized epilepsies reinforcing that these are not discrete categories of idiopathic epilepsies and are likely to share genetic determinants.

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ORIGINAL CONTRIBUTIONS

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Moran Ki¹, Taesung Park², Sung Gon Yi², Jin Kyoung Oh³ and BoYoul Choi³

¹ Department of Preventive Medicine, Eulji University School of Medicine, Daejeon, Korea.
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Epidemiologic study of a **vaccine**'s adverse events is not easy, so many countries have no reliable data. **Vaccines** containing the Urabe or Hoshino strain have been withdrawn from use in several countries. However, the data are not strong enough to form the basis of a recommendation not to use specific strains. The authors used a case-crossover design to estimate the relative risk of aseptic meningitis in children after receiving the measles-mumps-rubella **vaccine** in Korea. Study subjects were hospitalized children aged 8–36 months who had aseptic meningitis in 1998. Cases were confirmed by hospital chart reviews using previously defined criteria. Through a telephone survey, the authors obtained vaccination date and place information from parents' vaccination records. Study results showed that no significant risk was associated with the Jeryl Lynn or Rubini strain of the **vaccine** (relative risk = 0.6, 95% confidence interval (CI): 0.18, 1.97). For the Urabe or Hoshino strain, the relative risk was 5.5 (95% CI: 2.6, 11.8); the risk increased in the third week after vaccination (relative risk = 15.6, 95% CI: 5.9, 41.2) and was elevated until the sixth week. The case-crossover design was useful in confirming the risk of acute adverse events after receiving **vaccines**.

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Risk Analysis of Aseptic Meningitis after Measles-Mumps-Rubella Vaccination in Korean Children by Using a Case-Crossover Design

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Epidemiologic study of a vaccine's adverse events is not easy; so many countries have no reliable data. Vaccines containing the Urabe or Hoshino strain have been withdrawn from use in several countries. However, the data are not strong enough to form the basis of a recommendation not to use specific strains. The authors used a case-crossover design to estimate the relative risk of aseptic meningitis in children after receiving the measles-mumps-rubella vaccine in Korea. Study subjects were hospitalized children aged 8–36 months who had aseptic meningitis in 1998. Cases were confirmed by hospital chart reviews using previously defined criteria.

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and place information from parents' associated with the Jeryl Lynn or Rubini (.97). For the Urabe or Hoshino strain, week after vaccination (relative risk = case-crossover design was useful in

tic; mumps vaccine; vaccines

Abbreviations: CI, confidence interval; MMR, measles-mumps-rubella; RR, relative risk.

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