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30th International Epilepsy Congress took place in Montreal.

30th International Epilepsy Congress took place in Montreal from 23 to 27, June 2013. A total number of delegates at the IEC was 2,287. A total of 17,614 delegate badge scans were made on 78 sessions over 5 days including satellite symposia. Sessions were attended by 100 countries. The top 5 most represented countries were Canada (2,432 scans), United States of America (1,852 scans), Japan (1,102 scans), China (945 scans), and United Kingdom (770 scans). The IEC ended with great success.

Ambassador for Epilepsy Awards 2013

The Ambassador for Epilepsy Award is intended as a recognition of outstanding international contributions to activities advancing the cause of epilepsy, either internationally or with international impact. The award is given biannually at the IEC. Three clinicians from Asia and Oceania region received Ambassador for Epilepsy Awards 2013 in Montreal.



Ingrid E Sheffer(Australia)



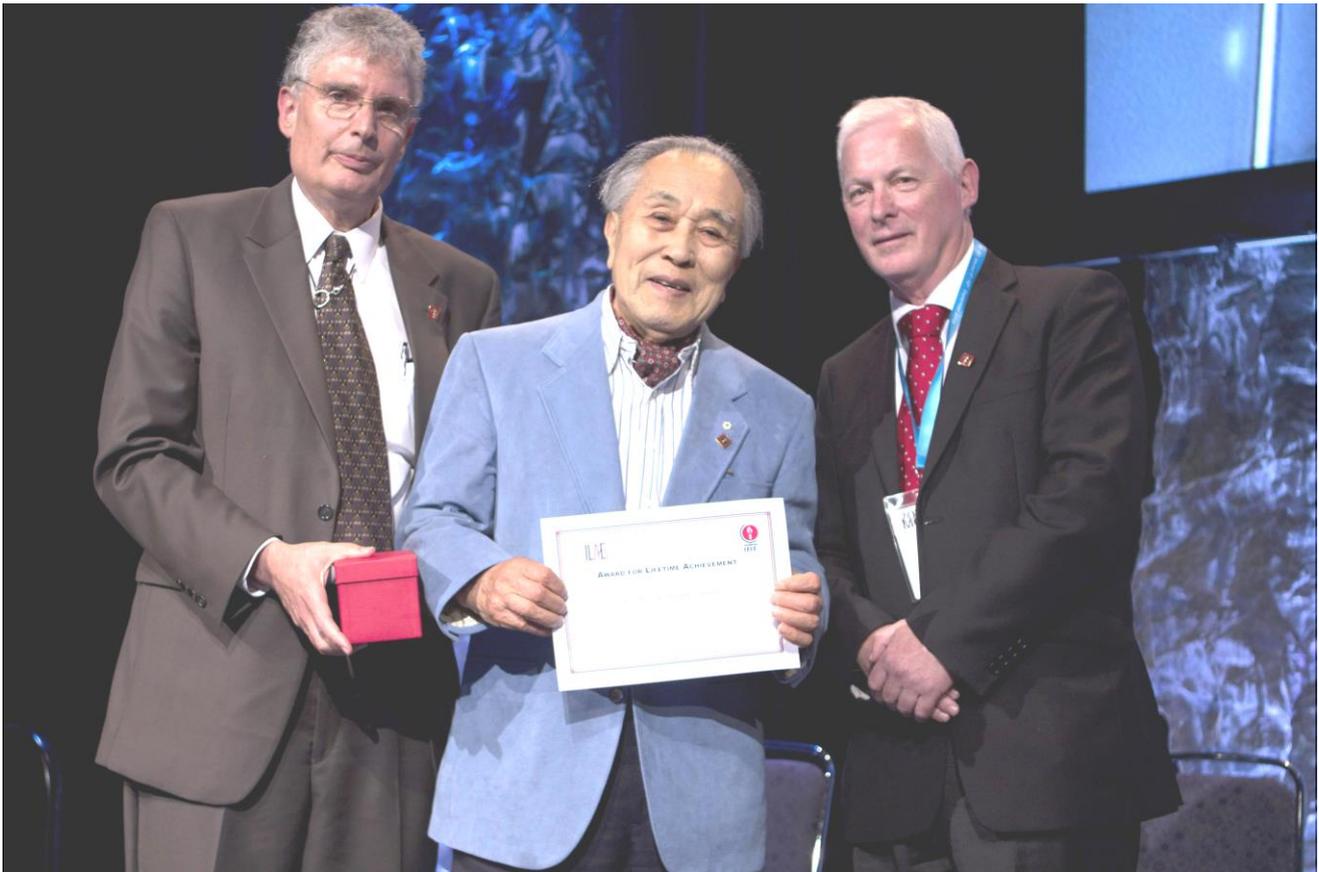
Sunao Kaneko(Japan)



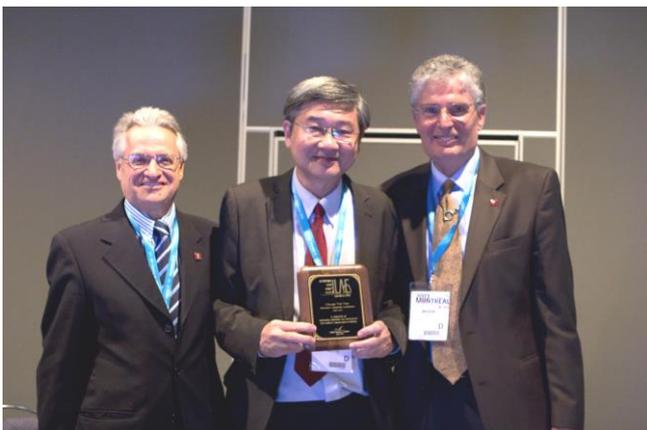
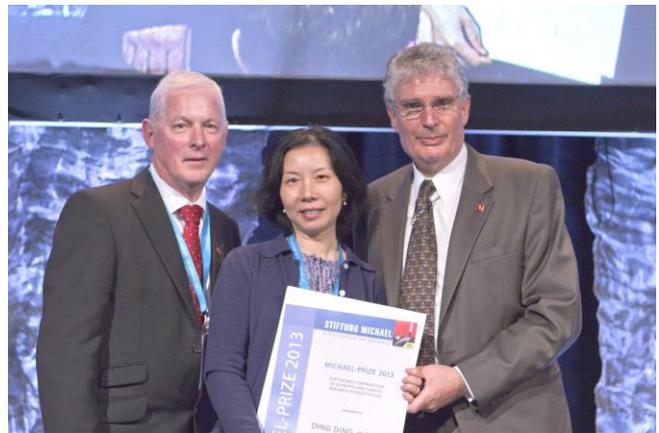
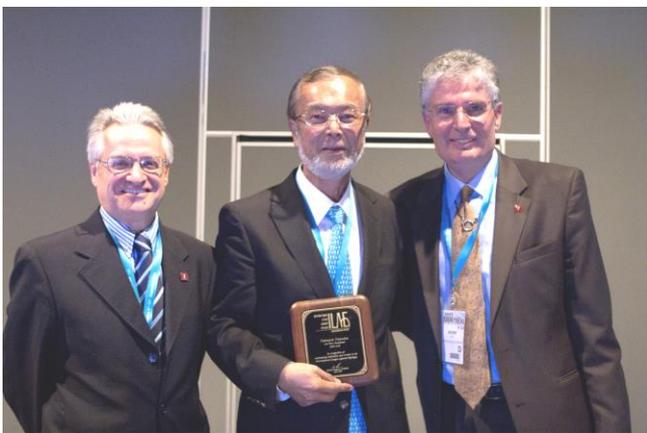
Byung-In Lee(korea)

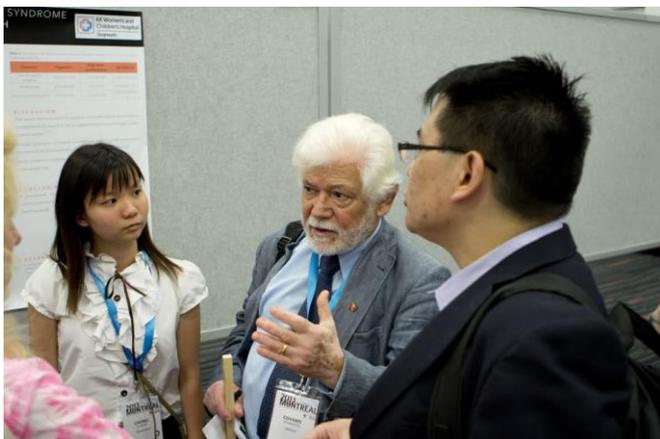
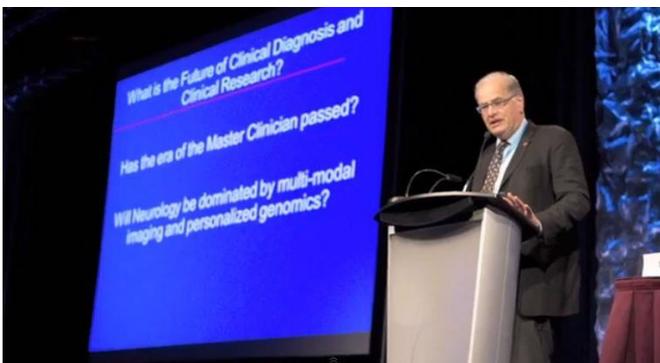
With, Mike Glynn (President of IBE) (left), Solomon L. Moshe (President of LIAE) (right)

Congress Highlights



Lifetime Achievement Award 2013 recipient
Prof. [Juhn A Wada](#), Canada. Prof Wada educated many scientists and epileptologists from Asian countries.





Business Meeting of Commission of Asian and Oceanian Affairs

The business meeting of the Commission of Asian and Oceanian Affairs (CAOA) was held on 27 September 2013 at Lotte City Hotel Mapo, Seoul, Korea. The meeting was chaired by Byung-In Lee (Korea) and attended by Leonor Cabral-Lim (Philippines), Andrew Bleasel (Australia), Kheng Seang Lim (Malaysia), Guoming Luan (China), Shih Hui Lim (Singapore), Chong Tin Tan (Malaysia), Akio Ikeda (Japan), Ernest Somerville (Australia), John Dunne (Australia), and Heung Dong Kim (KOREA). Apologies were received from Man Mohan Mehndiratta (India), Sunao Kaneko (Japan), and Tatsuya Tanaka (Japan).

The chair opened the meeting by welcoming the participants, and remarked that the CAO A 2103-2017 term covers an important transitional period, and that the region will play increasingly important roles in global developments and future contributions to ILAE leadership.

Report of CAO A Activities for the previous term (2009-2013)

Byung-In Lee outlined CAO A membership and office bearers. The region now has 19 chapters.

A review of the aims and missions of CAO A established in 2006-2009 and the action plans of CAO A drawn up in 2009 showed that all the planned actions have been achieved. The achievements were summarized as follows.

The CAO A website was successfully launched, with appropriate links. The first CAO A Newsletter was published in December 2012.

Regarding educational and training activities, educational meetings and teaching workshops were held. Epilepsy fellowships for future specialist in the regions were organized. An EEG certification course was held, and the Epilepsy Summer School was successfully completed.

Activities have been initiated to stimulate clinical and translational research.

To facilitate the Global Campaign against Epilepsy, workshops and meeting were held at the AOEC, and projects were planned.

The 8th and 9th Asian and Oceanian Epilepsy Congresses (AOECs) were held in 2010 and 2012, respectively.

The Asian and Oceanian Outstanding Achievement Epilepsy Award (AOEA) was established, and 11 persons were presented the awards at the AOECs.

To facilitate interactions and communications amongst chapters and commissions, several joint symposia were held with chapters in the region.

Regarding new chapter formation, Vietnam and Sri-Lanka have formed chapters. Myanmar is likely to form a chapter soon, and Cambodia and Laos over the next few years.

Furthermore, two new task forces have been instigated; the Pediatric Task Force (Chair Heung Dong KIM) and Constitutional Task Force (Chair John Dunne)

Report of ASEPA

The importance of the development of ASEPA activities to cater for a global audience was discussed. Possible sites for future conferences were deliberated. It was noted that Pakistan was not visited.

Plans of activities for the current term (2013-2017)

The action plans of CAO A for 2013-2017 are outlined below.

1. Enact "Bylaw of CAO A" through collaborations between the Constitution Task Force of CAO A and ILAE-Executive
2. Promote the diagnosis and treatment of neonatal and childhood epilepsies in the region through activities of Pediatric Task Force
3. Implement CAO A demonstration projects for the reduction of treatment gap in the region
4. Promote career development programs for young talented epileptologists in the region through expanding epilepsy fellowship programs, exchange programs for young research fellows among advanced epilepsy research institutes, and Regional Epilepsy School in collaborations with ILAE,

Asian and Oceanian Outstanding Achievement Epilepsy award

The rules have evolved and all seem to be happy. However there are comments that adjustment factors need to include the following elements: a balanced regional distribution of awards, reflection of the diversity in the type of contributions made, and where the contributions are made.

Reports of Task Forces and Committees

Information Committee (Sunao Kaneko)

The Information Committee accomplished the following for the term of 2009-2013.

The first project was to construct the CAO A website. The website (<http://www.caoa-epilepsy.org>) was opened in 2011. The structure was remodeled by suggestions from the ILAE, and was successfully linked to the ILAE website. Previous attempts to link the CAO A website to those of individual chapters was not successful because replies were not received from all chapters.

The second project was the publications of CAO A Newsletter. The first CAO A Newsletter was published on-line in December 2012. The original plan was to publish twice yearly, but the second CAO A Newsletter is still in a waiting stage due to a shortage of contents. Further contributions are needed from CAO A members and individual chapters.

The action plans of the Information Committee for 2013-2017 was summarized.

1. Organize a network consisting of information officers from all chapters (a mail was sent to each chapter asking for the name and address of the information officer).
2. Operate the CAO A website
3. Maintain the website by JSE at least on a monthly basis
4. Renew the website within this year //2013//
5. Link the CAO A website directly to that of each chapter
6. Expand website contents in line with the CAO A action plans
7. Publish the CAO A Newsletter twice yearly from 2014
8. Hold Information Committee meeting once a year at either the AOEC (2014) or IEC (2015).

Research Task Force (Chong Tin Tan, Akio Ikeda)

The Research Task Force organized the Stand-alone Meeting on July 1, 2011 in Taipei. The task force also held Pre-congress basic research programs in collaboration with ASEPA at each AOEC. The CAO A research priority document is under the editing process by Patrick Kwan.

The main task of the task force is to promote research in the region by initiating a number of joint research projects; particularly projects that answer some clinically important questions related to epilepsy in the region. Some candidate projects are as follows:

1. Stigma (Kheng Seang Lim)

The aim is to determine the relationship between public attitude and stigma in different communities in a multicenter study. This was presented in the meeting by Kheng Seang Lim as a model.

2. Women (Wendyl De Souza)

A study group consisting of investigators from different countries can be formed to explore different specific issues such as catamenial epilepsy and breast feeding; and psychosocial problems such as dating, arranged marriages, divorce, and children upbringing.

3. Complimentary treatment (Akio Ikeda)

A multicenter study can be conducted to assess the traditional treatments of epilepsy and their physiological mechanisms.

4. HLA (Kheng Seang Lim / Taiwan investigator)

The research may aim to compose a map for HLA*1502 prevalence in various racial groups in Asia, or to study the association of HLA with Stevens-Johnson syndrome associated with antiepileptic drugs other than carbamazepine.

5. Rare diseases

A study group can be formed to pool together the rare diseases, so that collectively there may be enough cases for publication.

6. Surgery

This can be an audit of less common surgical or other treatment procedures, e.g. multiple subpial transaction, or callosotomy

7. Economic cost of epilepsy

Research can investigate the economic cost of certain groups of epilepsy or certain procedures in different communities with different economic models; e.g., ketogenic diet

Actions: These include distributing the CAOAO Research Priority Report once it has been edited by P Kwan, and presenting 4-6 projects in the Singapore AOEC 2014.

Constitutional Task Force (John Dunne)

John Dunne reported that regarding rules of election, the ILAE constitution and By Laws acknowledge some flexibility for regions. ILAE have given an undertaking to review the rules and will do this in concert with local Commissions. The process of discussion with ILAE executive and Elections Commission as well as results of these discussions are important, and thus will be posted on CAOAO website (<http://www.caoa-epilepsy.org>).

Shih Hui Lim noted the importance of having India and China on the CAOAO.

John Dunne explained that two additional voting members are appointed by the ILAE President, in consultation with the Executive Committee and the CAOAO Chairperson-elect, and after the election of CAOAO members. Thus the voting members are: 1 chair, 4 voted, 2 appointed, and 1 past chair.

ASEPA Chairperson is accepted as ex officio. Therefore, previous ASEPA membership terms (including ASEPA Chair) does not apply to the CAOAO term limitations when seeking a CAOAO voting office.

Actions: All recommendations were accepted by the meeting. John Dunne will revise the document, obtain feedback from CAOAO members, and then send it to Helen Cross, General Secretary, to advise her of the progress. The next step will be to await the ILAE constitutional Committee feedback.

Global campaign (Ernest Somerville)

Ernest Somerville reported a group called Action against Untreated Epilepsy (AAUE), which is run by an Irish neurologist Victor Patterson running clinics in Nepal. Also an Indian woman who works from a train going around India allied with AAUE, working outside ILAE and local chapters. There was suggestion to give other groups like AAUE a chance to be involved. Shih Hui Lim may offer them spot to speak at AOEC.

Pediatric Task Force (Heung Dong Kim)

Action plans for 2013-2017 include promotion of diagnosis and treatment of neonatal and childhood epilepsy in the region, conducting ILAE Pediatric Committee activities in the region, and collaborate with pediatric experts in the region (Shinichi Hirose, Simon Harvey, Yuwa Jiang, Annannit Vidsudiphan, Heuy-Shong Wang).

Budget plans for 2014 (Leonor Cabral-Lim)

Regarding Guidelines for Committees and Meetings, these guidelines have been realized to minimize costs and teleconferences, plan meeting close to other large meetings, and submit program to ILAE. As to budgets for meetings, carry-over funds are available. Ernest Somerville suggested to include funds acquired locally, such as funds donated by pharmaceutical companies to local organizer, and JES funding for speakers' travel expenses.//

Review of AOEC program (Shih Hui Lim)

The dates for the APEC 2012 have been changed to 7-10 August. The invitations will come out in mid-October. The CAOAO Committee meeting will be held on 6 August 2014. Shih Hui Lim looked at the inputs from CAOAO members (at the CAOAO meeting on 27th September 2013), and fine-tuned the programme. For, detailed information, please see the CAOAO Website.

ES review of Myanmar project

Long-term funding is needed to provide medication. Generic medications could be supplied.

ASEPA fellowships (CT Tan)

In the coming year, the notice of application for ESA mini-scholarship could be posted in the Neurology Asia Journal and on its website, plus the CAOAO website. Notice and application procedures of Japan Epilepsy Society fellowship and Japan Epilepsy Research Foundation fellowship will be posted on the CAOAO website (<http://www.caoa-epilepsy.org>).

The applicants should contact host scientists/clinicians in Japan. The host scientists applies for research funds.

Japan Epilepsy Society : Ogawa Higashi cho, 4-6-15 Kodaira, Tokyo, 187-0031, Japan

The Japan Epilepsy Research Foundation (JERF) : 2-6-8 Doshomachi, Chuo-ku, Osaka City, 541-0045 Japan

2013 Michael Prize Winner Ding Ding MPH, PhD



Ding Ding, MPH, PhD, Associate Professor and neuro-epidemiologist at the Institute of Neurology, Fudan University, WHO collaborating center for research and training in neurosciences, Shanghai, China.

She started her career of epilepsy research in 2002, as a co-investigator of a demonstration project in China: Epilepsy management at primary health level, one of the main activities being carried out by WHO, ILAE and IBE within the framework of the Global Campaign Against Epilepsy. She was involved in the epidemiological survey and long-term follow up of people with epilepsy. She measured the disease burden of epilepsy, and evaluated the cost and outcome of phenobarbital treatment in resource-poor areas in China. Her research interest also includes the quality of life, cognitive function, and genetic studies of epilepsy. Her most important contribution was the investigation of the premature mortality risk in people with epilepsy in China.

Dr. Ding was awarded the Young Investigator Award at the 26th International Epilepsy Congress in 2005, the Bruce S. Schoenberg International Award in Neuroepidemiology of American Academy of Neurology in 2006, the Tadokoro Best Presentation Prize at the 6th Asian & Oceanian Epilepsy Congress in 2006, the Best Poster Prize at the 10th European Epilepsy Congress in 2012.

Currently, Dr. Ding is serving as the vice president of IBE, vice secretary general of China Association Against Epilepsy, member of ILAE Task Force of Global Campaign Against Epilepsy, member of ILAE Commission of Epidemiology, and member of IBE Research Task Force.

The Japan Epilepsy Research Foundation Research Grant for Inviting Overseas Researchers to Japan

Candidates : Epilepsy researchers from the Asian-Oceanian region

Qualifications : Physicians under 50 years of age who have been accepted for training by an institute in Japan and have a recommendation from the Commission of Asian and Oceanian Affairs (CAOA) of International League Against Epilepsy or International Affairs Committee of the Japan Epilepsy Society.

No. of grants : Three

Amount of each grant : 750,000 yen

The applicants should contact host scientists/clinicians in Japan. The host scientist (training supervisor: a member of the Japan Epilepsy Society) who will be responsible for the epilepsy researcher should submit an application.

Fifth CAAE International Epilepsy Forum

The 5th CAAE International Epilepsy Forum (CIEF) was held in Chongqing City, China from September 23 to 25 2013. A total of about 700 people participated in the Forum including delegates from Taiwan and epileptologists from international society.



The First CIEF was founded in 2004 which focus on the international hot issues targeted to specialists of epilepsy care. Since then, It has been held every other year supported by ILAE, IBE, WHO and become a brand conference now.

In the fifth CIEF, we invited more than 10 internationally well-known neuroscientist and epileptologists to carry out special lectures and seminars for this forum, including Prof Sten Grillner, former chairman of Nobel Prize in physiology or Medicine Committee talking about the modular nervous system; ILAE president Emilio Perucca reviewed the 25 years history of new AEDs; IBE president Athanasios Covanis summarizing difficulties and challenges in epilepsy treatment; chief-editor of SEIZURE Markus Reuber introducing his experience of how to publish papers in good journals; Prof Andrew J. Cole from Massachusetts General Hospital talking about Pre-Operative

6th Korean Epilepsy Society-Japan Epilepsy Society Joint Symposium

6th KES-JES symposium was held on 11 October 2013 at the occasion of the 47th Congress of the Japan Epilepsy Society in Kikakyushu, Japan. The Congress was organized by Prof. Sadatoshi Tsuji, International University of Health and Welfare. This symposium was very active and ended with great success. Next KES-JES symposium will be held at the occasion of Korean Epilepsy Society Meeting in Korea, next year.

14 : 30 ~ 15 : 20 Plenary session Neuroimaging & a new trend of treatment

Chair Person : Akio Ikeda (Department of Epilepsy, Movement Disorder and Physiology, Kyoto University.)

Eun Ik Son (President of Korean Epilepsy Society, Department of Neurosurgery, Dongsan Medical Center, Keimyung University)

KJSP-1 Stereotactic treatment of hypothalamic hamartoma

Shigeki Kameyama

Nishi_Niigata Chuo National Hospital

KJSP-2 Diet therapy for children with epilepsy

Hoon_Chul Kang

Department of Pediatrics, Pediatric Epilepsy Clinic, Severance Children's Hospital,
Yonsei University College of Medicine, Seoul, Korea

15 : 20 ~ 17 : 10 Neuroimaging & a new trend of treatment in JES and KES

Chair Person : Oguni Hirokazu, (Department of Pediatrics, Tokyo Women's Medical University)

Chun Kee Chung (Department of Neurosurgery, Seoul National University Hospital, Seoul National University)

KJS-1 Immunomodulatory therapy in Rasmussen syndrome

Yukitoshi Takahashi

National Epilepsy Center, Shizuoka Institute of Epilepsy and Neurological Disorders

KJS-2 Epilepsy Surgery and Cortical Dysplasia

Sang Kun Lee

Department of Neurology, Seoul National University College of Medicine

KJS-3 Diffusion tensor imaging in cryptogenic West s yndrome

Jun Natsume

Department of Pediatrics, Nagoya University Graduate School of Medicine

KJS-4 Simultaneous EEG and fMRI recording in epileptic patients

Joong Koo Kang¹)、 Hyun Wook Park^{2,3})

1) Department of Neurology, University of Ulsan College of Medicine, Asan Medical Center, Seoul, South Korea

2) fMRI Laboratory, Brain Science Research Center, Korea Advanced Institute of Science and Technology, Daejeon, South Korea

3) Department of Electrical Engineering, Korea Advanced Institute of Science and Technology, Daejeon, South Korea

KJS-5 VNS in Japan

Kensuke Kawai

Department of Neurosurgery, NTT Medical Center, Japan

KJS-6 Clinical application of PET in Pediatric epilepsy

Joon Soo Lee

Division of Pediatric Neurology, Department of Pediatrics, Severance Children's Hospital,
Yonsei University, Seoul, Korea

Report from Japan Epilepsy Society (JES)

As of April 27, 2013, JES has a membership of 2495, and is one of the largest epilepsy societies in the world. The vast majority of JES members are medical doctors (In total, 2436), which is a unique characteristic of JES. The membership is increasing annually. Compared to March 2012, there is a net increase of 122 members, comprising 1084 pediatricians, 486 psychiatrists, 437 neurologists, 387 neurosurgeons, and 42 others.

1. The 46th Annual Conference of the JES was held on October 11-12, 2012 in Tokyo under the leadership of the chair Dr. Masato Matsuura. (Fig.1) With an attendance of over 1200 participants, many active discussions had taken place. Especially, a large number of young doctors, psychologists, laboratory technicians, medical students, nurses and pharmacists attended the conference this year. The practical program, including the marathon lecture, was well received.



2. The JES has the world's only board certification system for "clinical epileptologist". Candidates for the certifying examination should have adequate clinical experience and are the first authors of scientific publications. These candidates then sit for an oral examination and a written examination. Only those who pass the examinations can become certified. Even famous scholars in epilepsy have to sit for the examinations in a fair manner. Apart from diagnosis and treatment, clinical

epileptologists are required to write important medical certificates related to driving license. Currently, 436 clinical epileptologists are practicing actively. However, this number is far from adequate to address the increase in elderly onset epilepsy. For this reason, as a means to upgrade the epilepsy care network, a website for the network has been established by a core of JES members as a research project of the Ministry of Health, Labour and Welfare.

3. On March 19, 2012, the "Memorial International Epilepsy Symposium One Year After the East Japan Disaster" was held in Tokyo. (Fig.2, 3) ILAE President Dr. Nico Moshe, IBE President Mr. Mile Glynn, together with many ILAE/IBE officers and JES members attended the symposium. In addition to disaster relief, a wide range of topics from sociological issues to the latest advances in clinical and basic epileptology were presented and discussed.



4. To prevent traffic accidents related to epileptic seizures, the Legislative Affairs Committee is engaged in survey and preventive activities in collaboration with the National Police Agency and other related bodies. As one of such activities, a symposium was held on May 11, 2013 in Tokyo aiming at obtaining accurate understanding regarding epilepsy by the media and opinion leaders including Diet members.

5. At the 40th Annual Meeting of the Japanese Association for Acute Medicine (JAAM), the first joint symposium with the JAAM was held with the title "Accomplishing Reform in Epilepsy Care: Bridging Acute Phase Seizure Treatment and Chronic Phase Treatment". There is an increasing recognition of the need of collaboration from acute phase treatment that continues onto epilepsy care by multiple specialties.



KEC 2013, New Horizon of Epilepsy

Korean Epilepsy Congress 2013 (KEC 2013) was successfully held in Seoul, Korea on June 13 – 15, 2013, attended by about 500 participants from 17 countries.

Last year, KEC was transformed into an international congress in accordance with the Korean Epilepsy Society(KES)'s mission to become globalized both in its progress and contribution to society.

KEC 2013 consisted of even more advanced scientific programs this year compared to last year including 13 Parallel Symposiums, 5 Teaching Sessions, 6 Lunch & Satellite Symposiums, 1 Presidential Symposium, 1 Plenary Session, 5 Oral Presentation Sessions, Poster Presentations, and the Korean Epilepsy Preceptorship Program.

28 overseas invited speakers from 9 countries

Alice Patton(USA)	Jayoung Pak (USA)
Anannit Visudtibhan(Thailand)	John Walter Dunne(Australia)
David Ko(USA)	Ki Hyeong Lee(USA)
Dong Zhou(China)	Laurence J. Eckel(USA)
Douglas R. Nordli, Jr.(USA)	Lixin Cai(China)
Emilio Perucca(Italy)	Robert Ryan Clancy(USA)
Ernest Robertson Somerville(Australia)	Sandra L. Helmers(USA)
Gary W. Mathern(USA)	Sarat Chandra Poodjipedi(India)
Gesina F. Keating(USA)	Sockyong Koh(USA)
Hazel Ladores Paragua(Philippines)	Steve Chung(USA)
Hideaki Shiraishi(Japan)	Tony Wu(Taiwan)
Howan Leung(Hong Kong, China)	Yong D Park(USA)
Hyunmi Choi(USA)	Yoshihisa Kida(Japan)
Hyunmi Kim(USA)	Yuwu Jiang(China)

It provided renowned doctors and researchers from all over the world, who up to now did not have many opportunities to exchange information, with the rewarding chance to discuss their researches and knowledge with each other. In particular, the lectures of Emilio Perucca (President, ILAE Executive Committee) garnered much attention and acclaim from the participants.

The KES set up a Travel Bursary Program to encourage young medical scientists overseas to participate in the KEC 2013, which proved to be a fruitful initiative. Also, the various awards conferred to remarkable presentations and posters helped KEC 2013 to enhance its position as an international congress.

Though the KEC 2013, every participant could gain a greater understanding of how their profession is practiced across the world. Also, it was a good opportunity to meet with international colleagues, both old and new.

We look forward to your continued interest in the development of the KEC, and hope to see you at the next congress.



Malaysian Society of Epilepsy



Newsletter

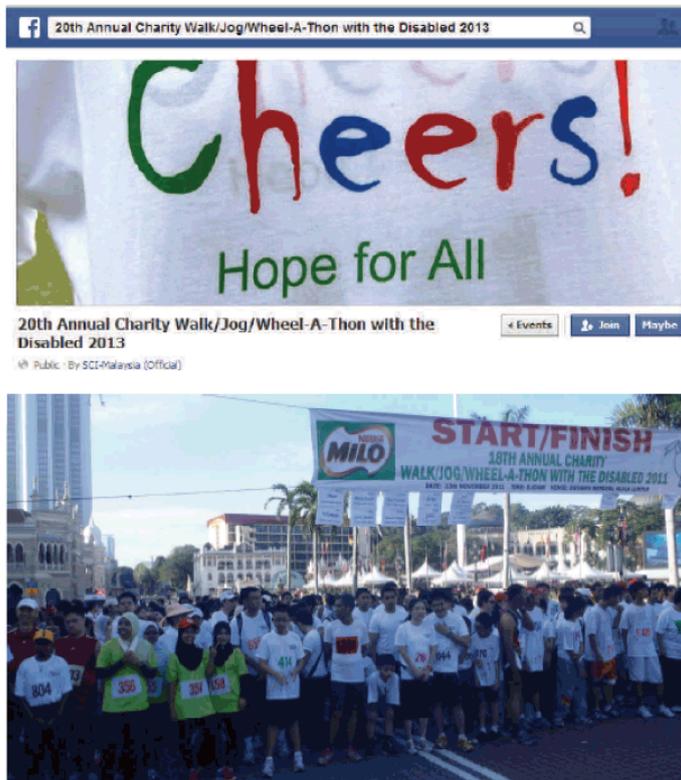


MALAYSIAN SOCIETY OF EPILEPSY (PERSATUAN EPILEPSI MALAYSIA)



Purple Day, 24 November 2013

20th Annual Charity Walk/ Jog/ Wheel-A-Thon with the Disabled 2013 will be held on **24th November 2013**. In conjunction with this event, the Malaysian Society of Epilepsy has participated as one of the non-government organization and will celebrate the epilepsy purple day on the same day. This aims to promote awareness of epilepsy among the other non-government organizations as well as the public. The event will be held in Padang Merbok, Kuala Lumpur, at 8am, with a distance of 4 km. Your participation and support are needed. Please look for the Malaysian Society of Epilepsy banner on that day. If you are keen to participate in the walk, please contact Rosalind at 0123582715 or Monica at moniwocm@gmail.com directly.



Upcoming events:

Family Day 2014

- Program highlight: Aerobic/ Yoga
- 18 Jan 2014
- Venue: To be confirmed

Asian-Oceanian Epilepsy Congress in Singapore, 7-10 August 2014

- A trip will be organized
- Update will be posted in Facebook

Penang Epilepsy Awareness

- End of February 2014

Facebook: [Malaysian Society of Epilepsy \(Persatuan Epilepsi Malaysia\)](#)

Employment Workshop 2013

Epilepsy employment workshop was held on 21 September from 2-4pm at 12th floor Conference Room, Menara Utama, University Malaya Medical Centre, Kuala Lumpur. This workshop will be held once a year aiming to promote employment among people with epilepsy. Speakers included a job coach from Social Welfare Department, as well as patients, social worker, research student, and doctors.

The topics are employment of people with epilepsy in Malaysia, job coach in Malaysia and employment service in UMMC.

Please join the Facebook and local newspaper so that you are informed of any upcoming events.



Advertisement in local newspaper

EPILEPSY WORKSHOP

THE Malaysian Society of Epilepsy invites members, supporters and care givers to attend a workshop on employment for epileptic patient on Sept 21, 2pm to 4pm at 12th floor Conference Room, Menara Utama, University Malaya Medical Centre, Kuala Lumpur. For details and registration, call 03-7989 8147 (Monica), 03-2022 2110 (Rosalind), or email cheer0312@yahoo.com, epilepsymalaysia@gmail.com.

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EPILEPSY COUNCIL

Malaysian Society of Neurosciences (Persatuan Neurosain Malaysia)

For the first time in Malaysia, a teaching course dedicated specifically to Epilepsy was held in Port Dickson on 30 and 31 August 2013, under the auspices of the Epilepsy Council, Malaysian Society of Neurosciences. One hundred and twenty people (mostly doctors and some technicians) attended the course. Faculty members included international experts (Prof Ley Sander from Queen Square and Prof Lim Shih Hui from Singapore) and local epileptologists and neurologists with an interest in epilepsy (Prof Dato Raymond Ali, Assoc Prof Wong Sau Wei, Assoc Prof Lim Kheng Seang, Assoc Prof Tan Hui Jan, Dr Ahmad Rithauddin, Dr Soo Hua Huat, Prof Norlisah, Dr Suganthi, Dr N Vairavan). During the 2-day course, a wide range of topics in epilepsy in children and adults was covered, focusing mainly in clinical distinction, phenomenology and management. There was good participation from the audience which consisted mainly of doctors with an interest in neurology and other health professionals.



Photo (from left to right): Dr Suganthi, Prof Lim Shih Hui, Prof Ley Sander, Prof Dato Raymond Azman Ali, Assoc Prof Tan Hui Jan, Assoc Prof Lim Kheng Seang, Assoc. Prof Wong Sau Wei, Dr Sapia, Dr Soo Hua Huat and Ms Loh Hui Pin

Report Prepared by
Loh Hui Pin
Secretariat,
MSN Epilepsy Council

Driving license and traffic accidents of persons with epilepsy:

Japanese situation

Masato Matsuura

Chair, Committee of Legislative and Medical Care Affairs

In Japan, a series of serious traffic accidents involving persons with epilepsy, which caused deaths and injuries, occurred from 2011 to 2012. From the beginning of 2013, amendment of the Road Traffic Act and new penal regulations for persons with epilepsy who cause accidents with fatality and injury are being debated in the Diet, and the whole situation is still in a state of turmoil. This article describes the present situation of driving license for persons with epilepsy in Japan and the activities of the Japan Epilepsy Society regarding this issue.

In 2002, the Road Traffic Act in Japan was amended, granting a driving license for private vehicle to persons with epilepsy who fulfill given requirements. These requirements were (1) a seizure-free period of two years, and the attending doctor certifies that seizures are unlikely to occur during the following several years; (2) only simple seizures occurred during an observation period of one year; or (3) seizures occurred only during sleep during an observation period of two years. Persons with epilepsy who wish to have a driving license should submit a medical certificate issued by the attending doctor at the initial application, and are required to declare their disease conditions during license renewal every five years.

According to the police data, 71 accidents causing injury or death presumably related to epilepsy seizures occurred during 2011. Among them, only five persons obtained a driving license through the above-mentioned official procedures. Victims and families of these traffic accidents as well as the mass media assert that non-compliance with the current rules leads to the traffic accidents causing injury or death, and the National Police Agency proposed to toughen penalties on persons with epilepsy not observing the rule, and to establish a system of notification by the attending doctor. The Japan Epilepsy Society conducted a questionnaire survey on the problems of the current rules. The survey concluded that one of the reasons for non-compliance is that many persons feel that the requirements are too strict. Hence in 2012, the Society proposed new requirements under which a person with epilepsy may be regarded as fit-to-drive: (1) when a person has been seizure-free for one year or longer, and still continues to take the same medications; (2) in the case that seizure recurs after dose reduction or discontinuation of anti-epileptic drugs as instructed by the doctor or due to unavoidable medical or social reasons, the person has been seizure-free for three months after returning to previous treatment regime, and still continues to take the same medications; or (3) in the case of a provoked seizure or the first unprovoked seizure, the person has been seizure-free for 6 months thereafter. The rationale is that changing to rules that are acceptable to all would protect the livelihood of the vast majority of persons with epilepsy who have low risk for accidents, and meanwhile prevent the non-reporting of a small minority of persons with high risk for accidents. The matter is being discussed with the National Police Agency, and such change in requirements is likely to take a long time.

On the other hand, an expert panel of the National Police Agency concluded that there was a need to impose tougher penalties on persons who make false declaration and to establish a system of voluntary notification by the attending doctor. The Japan Epilepsy Society contested on several points, including (1) the effectiveness of toughening penalties alone is questionable, and may even make high-risk drivers conceal their disease thereby increasing the risk of accidents; (2) since a system of notification by the attending doctor will damage the doctor-patient relationship, notification should be made not to the police but to a third party associated with the medical profession; (3) the attending doctor should be exempted from any responsibility whether they notified or did not notify; (4) to implement notification, comprehensive guidelines for the whole spectrum of diseases and also

guidelines for individual diseases are required; and (5) appropriate social security measures should be given to persons with epilepsy who are not fit to drive, such as employment protection, transportation cost reduction, and alternative proof of identity.

In 2013, the National Police Agency submitted amendments of the Road Traffic Law to the Diet for discussion, including (1) false statement in a disease condition declaration form is liable for a prison sentence of up to one year or a fine of up to ¥300,000; and (2) a doctor who is aware that a person with epilepsy is at high risk for traffic accident and is in possession of a driver license may notify the result of diagnosis to the Public Safety Commission. In addition, the Ministry of Justice submitted the Draft Outline of Amendments to the Criminal Law to the Diet for discussion, including a prison sentence of up to 12 years for persons who, under the influence of specific diseases, caused fatal injury, and a prison sentence of up to 15 years for causing death. Since the later amendments include new penalty contents that name the specific diseases, the Japan Epilepsy Society publicly announced opposition to the bill. The Society asserts that toughening penal measures is unlikely to prevent traffic accidents, and that fundamental reform of road traffic policies, including traffic education and environmental improvement are needed to prevent malicious driving.

In May 2013, the Japan Epilepsy Society and Japan Epilepsy Association co-sponsored an emergency symposium entitled "Road Traffic Law amendments / Criminal Law new law enactment and social participation of persons with diseases and disabilities" and invited Diet members and media-related persons to attend. In the symposium, it was concluded that the present proposed amendments place priority on the theory of elimination, and these amendments are not only questionable in terms of their effectiveness, but may even aggravate discrimination in the society; hence a review, including upgrading the related support laws, is necessary after several years.

Thereafter, in the Cabinet Committee of the House of Councilors, several additional resolutions were passed, including (1) give considerations so as not to create discrimination due to diseases; (2) delegate the questionnaires on specific diseases and guidelines on notification by doctors to the Medical Association or related societies, and they should be easily understandable by the public; (3) establish contact points that provide consultation services in order to facilitate self-declaration without anxiety; (4) provide medical, welfare, health, education and employment supports to ensure that the persons concerned are not disadvantaged; (5) provide rapid relief in the case of violation of the rights and interest of the persons concerned; (6) promote scientific research and studies, and revise the operational standards to reflect the latest medical knowledge; and (7) review the laws after five years. These matters are currently being debated in the House of Representatives.

Remembrance Ceremony for Professor Emeritus Shunsuke Ohtahara



A remembrance ceremony for late Professor Shunsuke Ohtahara, who passed away on March 16, 2013, was held on May 12 at Hotel Granvia Okayama. Over 200 persons who have connections with Professor Ohtahara gathered from all over Japan. Each person who attended offered a white rose on the altar.

Shunsuke Ohtahara Memorial International Symposium and Public Seminar on Developmental Disabilities



Professor Shunsuke Ohtahara died on March 16, 2013, at the age of 83. His drive to pursue new scientific findings and to relieve the suffering of children with neurological disabilities, particularly severe epilepsy including Ohtahara syndrome, is still alive in our hearts and minds. The symposium and the associated public seminar have been organized in his honor in order to ensure and spread his last wishes.

The distinguished guest speakers who delivered state-of-the-art lectures included Professors Jürgen Sperner (Germany), Jean Gotman (Canada), Gregory L. Holmes (USA), Renzo Guerrini (Italy), Hiroshi Ohtsubo (Canada), and Akio Ikeda (Japan). Professor Nam-ho Huh, Vice President of Okayama University, gave a heartfelt welcome remark, and hot discussion ensued with the guidance of outstanding Japanese researchers, including Professors Kousaku Ohno, Amami Kato, Koji Abe, Masahiro Nishibori, Hideki Matsui, Masaru Ohnishi, and Jun Hamada.

Welcome Myanmar to CAO A

Myanmar becomes 20th chapter of CAO A. ILAE provisionally accepted Myanmar as a chapter of ILAE. Definitive acceptance of new chapters is granted by vote of the General Assembly of the ILAE. The next General Assembly will take place during the 31st International Epilepsy Congress in Istanbul, Turkey in September 2015.

Message form Myanmar chapter (Epilepsy Special Interest Group of Myanmar)

Two years ago, in September 2011, Epilepsy Special Interest Group of Myanmar was formed with the simple aims to serve people with epilepsy, to expand health professionals' knowledge of epilepsy and to join ILAE as Myanmar epilepsy chapter. Altogether 21 neurologists were included as executive committee members. Then, we applied for ILAE chapter after 1 year and now in October 2013, after 2 years, ILAE executive committee has granted provisional acceptance to the Epilepsy Special Interest Group of Myanmar as an ILAE chapter. Therefore, Myanmar has become the 20th chapter of the Asian Oceanian region. We are looking forward having a good new about the definitive acceptance of our chapter in the coming General Assembly in 2015.

Each Region and country has a unique history, resources and characteristics, and each Chapter faces distinct issues and challenges for managing people with epilepsy. Poor human resources, insufficient knowledge of epilepsy among health professionals and other stake holders and relatively low interest and priority by the government will be important issues in Myanmar.

We accept there will be a long journey to fulfill ILAE's mission of ensuring the health professionals, patients and their care providers, governments, and the public have the educational and research resources that are essential in understanding, diagnosing and treating persons with epilepsy in Myanmar, however, on the other hand, becoming an ILAE chapter is a really essential step towards that mission.

We also believe, as an ILAE chapter, we will have more opportunities for care of people with epilepsy as well as more responsibilities. We promise to fulfill these tasks and responsibilities. Finally we would like to give our commitment to cooperate with ILAE, CAO A and individual ILAE chapters for the greatest benefit of people with epilepsy.

Dr Kyaw Linn
General Secretary
Epilepsy Special Interest Group of Myanmar

Senior consultant pediatrician and pediatric neurologist
Yangon children hospital
Yangon, Myanmar

Invitation to Japan Epilepsy Society Scholarship 2013

With the objective to train young researchers in the Asian Oceanian Region, the Japan Epilepsy Society (JES) has decided to subsidize part of the research expenses during the scholar's study in Japan. From this year, the JES scholarship will receive additional sponsorship from UCB and Otsuka Pharmaceutical Co.

Conditions for application

The applicant should fulfill the following conditions:

1. A medical doctor
2. Scheduled to engage in research for at least 6 months in a Japanese institute during 2014
3. Below 35 years of age (< 35) at the time of application
4. At the time of application, the applicant should have already found a research institute in Japan which is willing to accept him/her for training (the receiving institute), and should have decided the study period. The potential supervisor at the receiving institute (the recommending person), who should be a member of JES, should be willing to recommend the applicant, apply on his/her behalf, and be the contact person during the selection process and study period.

Obligation

The scholar should present the research results at the Annual Conference of JES either during the study period or within one year after the study period. In the case that presentation at the Annual Conference cannot be materialized, the scholar should submit a report of study to JES.

Application procedures and scholarship contents

Application procedures and scholarship contents

1. The scholarship is scheduled to be award to two scholars for 2014.
2. The applicant should first find a receiving institute and send all relevant application documents to the receiving institute (not directly to JES). The recommending person at the receiving institute then submits a recommendation letter and the applicant's curriculum vitae to the secretariat of JES (E-mail: jes-oas@umin.ac.jp).
3. The recommending person will be the contact person during the selection process and study period.
4. For each scholar, the scholarship will be ¥500,000 (Japanese Yen) including research and living expenses. Another ¥100,000 will be paid for one-way travel to Japan. Receipt of other research funds is permitted.
5. The research expense and travel expense will be paid by the Japan Epilepsy Society to the recommending person.
6. The deadline of application is November 30, 2013.



www.epilepsysingapore2014.org

10th Asian & Oceanian Epilepsy Congress

- NEW CONGRESS DATES -

The 10th Asian & Oceanian Epilepsy Congress has been rescheduled from late August to the **7th to the 10th of August, 2014**. The new dates coincide with Singapore's National Day on the 9th of August so delegates will be able to soak up the electric atmosphere of the city including a fantastic firework display at Marina Bay.

The Main Topics are:



- AED Tolerance and Resistance
- Epilepsy Burden
- Neuro-stimulation in Treatment of Epilepsy
- Electrophysiological Markers of Epileptogenic Zone
- Recent Advances in Molecular Genetics of Epilepsy



Website

Please visit the website for the 10th Asian & Oceanian Epilepsy Congress to learn more about the congress, the venue and all the latest news.

Visit the website now: www.epilepsysingapore2014.org

10th Asian & Oceanian Epilepsy Congress, Singapore 2014

Thursday 7th August		Friday 8th August			Saturday 9th August			Sunday 10th August			
		ASEPA Didactic Lecture 1 07:30 - 08:15			ASEPA Didactic Lecture 3 07:30 - 08:15			ASEPA Didactic Lecture 5 08:00 - 08:45			
		ASEPA Didactic Lecture 2 08:15 - 09:00			ASEPA Didactic Lecture 4 08:15 - 09:00			Awards Ceremony			
Pre-Congress ASEPA Teaching Course 1 08:15 - 11:45	Pre-Congress ASEPA Teaching Course 2 08:15 - 11:45	Main Session 1 09:00 - 10:30			Main Session 2 09:00 - 10:30			Main Session 3 09:00 - 10:30			
		Coffee Break 10:30 - 11:00			Coffee Break 10:30 - 11:00			Coffee Break 10:30 - 11:00			
		Post Main Session 1 11:00 - 12:30	Parallel Sessions 11:00 - 12:30 PS1 PS2 PS3		Epilepsy & Society Session 09:00- 15:30	Post Main Session 2 11:00 - 12:30	Parallel Sessions 11:00 - 12:30 PS4 PS5		Post Main Session 3 11:00 - 12:30	Parallel Sessions 11:00 - 12:30 PS7 PS8	
Chapter Convention 12:00 - 13:45		Lunch & Posters 12:30 - 13:30				Lunch & Posters 12:30 - 13:30					
Chairman's Symposium 14:00 - 15:30		Satellite Symposium 1 13:30 - 15:00				Satellite Symposium 3 13:30 - 15:00					
Masakazu Seino Memorial Lecture 15:30 - 16:15		Platform Sessions 15:00 - 16:00	Tournament of the Brainwaves 15:00 -- 16:00	GCAE Forum 15:00 - 16:00		Platform Sessions 15:00 - 16:00	Tournament of the Brainwaves 15:00 -- 16:00				
		Coffee Break 16:00-16:30				Coffee Break 16:00-16:30					
Recent Research Discoveries 16:15 - 17:45	Research in Progress 16:15 - 17:45	Video Quiz 1 16:30 - 17:30	Debate 1 16:30 - 17:30	GCAE Forum 16:30 - 17:30		Video Quiz 2 16:30 - 17:30	Debate 2 16:30 - 17:30	Workshop 16:30 - 17:30			
		Satellite Symposium 2 17:30-19:00									
Welcome Ceremony 18:30 - 19:30											
Welcome Reception 19:30 - 20:30											

Take part in the inaugural Epilepsy Quiz "The Tournament of the Brains" at the 10th Asian & Oceanian Epilepsy Congress in Singapore in August 2014

Teams of 4 from at least 3 different Chapters and Member Associations, are pitched against each other answering quick-fire questions that will demonstrate their knowledge in a wide range of epilepsy-related issues.



It's time to talk to your colleagues from across Asia and Oceania and put together a winning team.
For more information on the congress, visit www.epilepsysingapore2014.org

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