

LETTER TO THE EDITOR

Prevalence of Sleep-Related Hypermotor Epilepsy—Formerly Named Nocturnal Frontal Lobe Epilepsy—in the Adult Population of the Emilia-Romagna Region, Italy

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Dear Editor,

SLEEP has previously published our cohort study on the prevalence of nocturnal frontal lobe epilepsy (NFLE)¹ in the adult population of two health areas of the Emilia-Romagna region, northern Italy (the city of Bologna and five districts of the province of Modena). An international consensus conference held in Bologna in September 2014 redefined the boundaries of this epileptic syndrome. The panel recommended that the name of the syndrome be changed to Sleep-related Hypermotor Epilepsy (SHE), reflecting evidence that the attacks are associated with sleep rather than time of day, the seizures may arise from extrafrontal sites, and the motor aspects of the seizures are peculiar.² Moreover, new diagnostic criteria with three levels of certainty were developed²: “witnessed (possible) SHE,” in case of an eye witness reporting a history of sleep-related hypermotor seizures (hyperkinetic features or asymmetric tonic/dystonic posturing, short duration, abrupt onset and offset, stereotyped motor pattern); “video-documented (clinical) SHE,” in case of audio–video documentation of a hypermotor seizure; and “video–EEG documented (confirmed) SHE,” in case of video–EEG documentation of hypermotor seizure arising from sleep associated with epileptic discharges or interictal epileptiform abnormalities. The consensus conference recognized the epidemiology of SHE as a major research gap.² For this reason, we checked all the NFLE cases included in the above reported study¹ in the light of SHE diagnostic criteria. We can now state that all 14 patients included had a diagnosis of SHE: in particular, 8 patients had a confirmed SHE, while 6 had a clinical

SHE. Therefore, our previously published results on the crude prevalence of NFLE, 1.8 per 100 000 (95% confidence interval 0.7–4.0) in Bologna and 1.9 per 100 000 (0.8–3.7) in Modena, should be construed also as the prevalence of SHE in the adult population.

REFERENCES

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DISCLOSURE STATEMENT

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