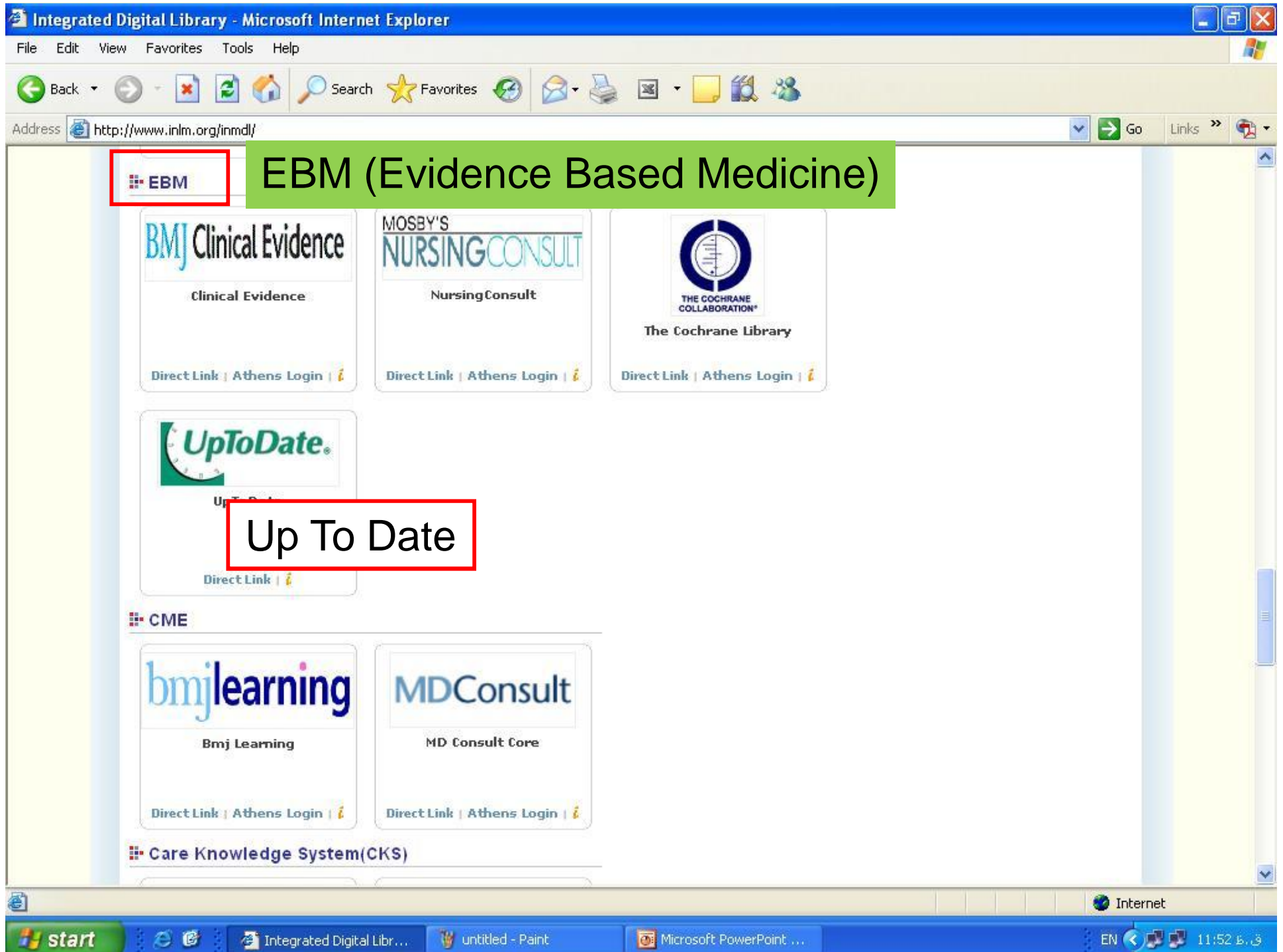




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Reza Mohamadi

[Mohamadi.psk@gmail.com](mailto:Mohamadi.psk@gmail.com)



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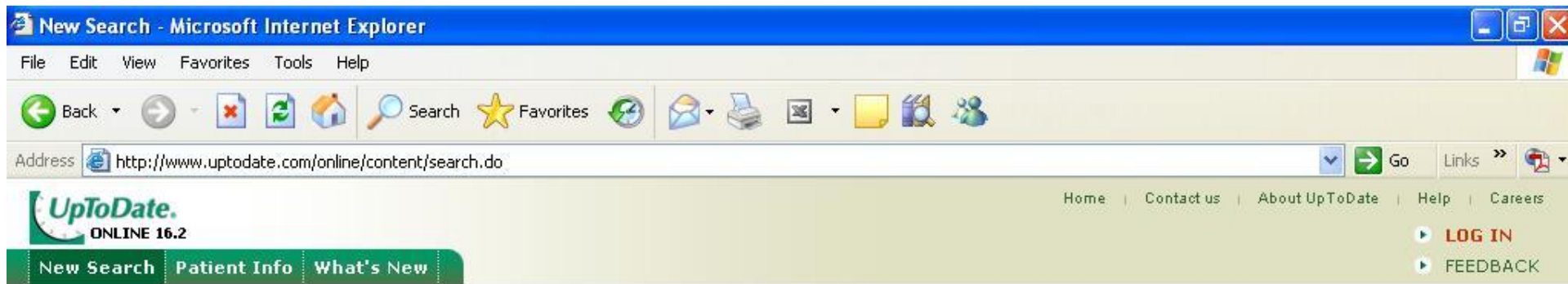
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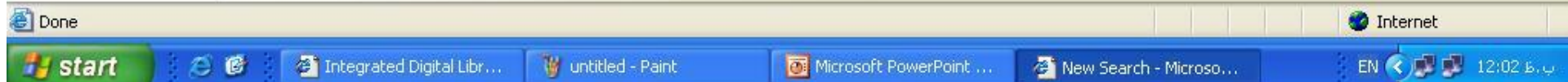




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- Epilepsy syndromes in children**
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- Post-traumatic seizures and epilepsy
- Treatment of seizures and epileptic syndromes in children
- Psychogenic nonepileptic seizures
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- Etiology and prognosis of neonatal seizures
- Clinical and laboratory diagnosis of seizures in infants and children
- Localization-related epilepsy: Causes and clinical features
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**ABSENCE SEIZURES** – Absence seizures (also called petit mal or generalized nonconvulsive seizures) are a common pediatric epileptic disorder [38]. The seizures consist of multiple brief staring episodes with behavioral arrest that may recur hundreds of times daily. They are associated with generalized 3-hertz spike and slow wave discharges on electroencephalogram (EEG).

Several epileptic syndromes with markedly different clinical courses and prognoses have absence seizures as the only or most predominant seizure type. The age of onset and clinical phenotypes of the absence syndromes are of particular interest. The clinical phenotypes of the absence syndromes may differ from one syndrome to the other; as an example, in epilepsy with myoclonic absences (EMA), EEG spikes are followed by prominent myoclonic jerks that may cause the child to fall, whereas in children with the more common childhood absence epilepsy (CAE) and juvenile absence epilepsy (JAE), the spikes are not associated with myoclonus. Although the age of onset, clinical manifestations of the seizures, neurologic status of the children, and prognosis differ among the various syndromes, the EEG patterns are quite similar and the approach to treatment is fundamentally the same, with [ethosuximide](#), [valproic acid](#),

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**ABSENCE SEIZURES** — Absence seizures (also called petit mal or generalized nonconvulsive seizures) are a common pediatric epileptic disorder [38]. The seizures consist of multiple brief staring episodes with oral arrest that may recur hundreds of times daily. They are associated with generalized 3-hertz

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The clinical expression of absence seizures themselves may differ from one syndrome to the other; as an example, in epilepsy with myoclonic absences (EMA), EEG spikes are followed by prominent myoclonic jerks that may cause the child to fall, whereas in children with the more common childhood absence epilepsy (CAE) and juvenile absence epilepsy (JAE), the spikes are not associated with myoclonus. Although the age of onset, clinical manifestations of the seizures, neurologic status of the children, and prognosis differ among the various syndromes, the EEG patterns are quite similar and the approach to treatment is fundamentally the same, with [ethosuximide](#), [valproic acid](#),

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The other seizure types that accompany the absences are specific for the particular syndrome. The Lennox-Gastaut syndrome (LGS) and myoclonic partial epilepsy (MAE) are more serious epileptic disorders in which children have other seizure types,

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**INFORMATION FOR PATIENTS** — Educational materials on this topic are available for patients. (See "[Patient information: Seizures in children](#)" and "[Patient information: Treatment of seizures in children](#)"). We encourage you to read or e-mail these topics, or to refer patients to our public web site [www.uptodate.com/patients](http://www.uptodate.com/patients), which includes these and other topics.

**ACKNOWLEDGMENT** — The author and editorial staff at UpToDate, Inc. would like to acknowledge Barry R Tharp, MD, who contributed to an earlier version of this topic review.

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**REFERENCES**

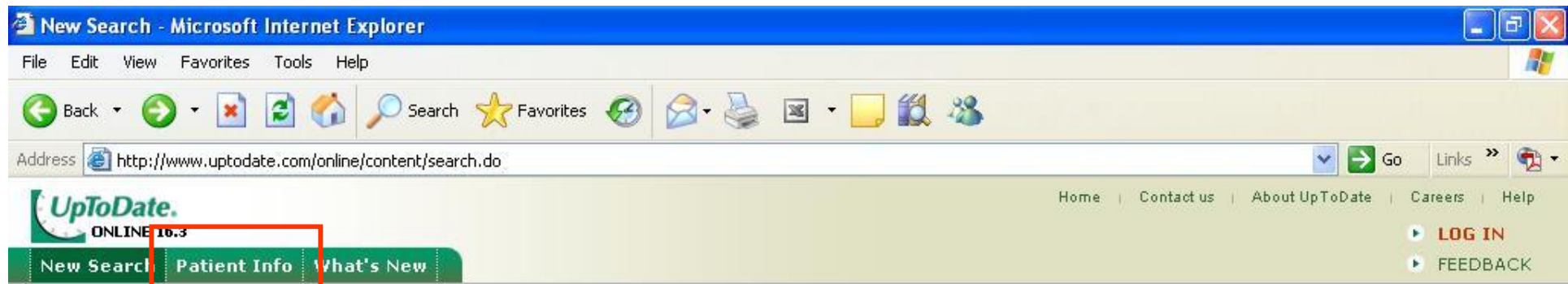
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4. Duchowny, M, Harvey, AS. Pediatric epilepsy syndromes: an update and critical

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## Kidney disease

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Calculator: Body mass index for adults (Patient information)

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### Calculator: Body Mass Index for Adults (Patient information)

Body Mass Index (BMI) is a measure of weight in relation to height, and is the most practical way to estimate if an individual is underweight, healthy weight, overweight, or obese.

Enter height and weight:

Height  in

Weight  lb

Result:

BMI  kg/m<sup>2</sup>

### Body Mass Index Interpretation

BMI < 18.5	: Underweight
BMI >= 18.5 and < 25	: Healthy weight
BMI >= 25 and < 30	: Overweight
BMI >= 30	: Obesity

### References

1. National Institutes of Health (NIH), National Heart, Lung, and Blood Institute (NHLBI). The practical guide: identification, evaluation, and treatment of overweight and obesity in adults. Bethesda: National Institutes of Health. 2000, NIH publication 00-4084.

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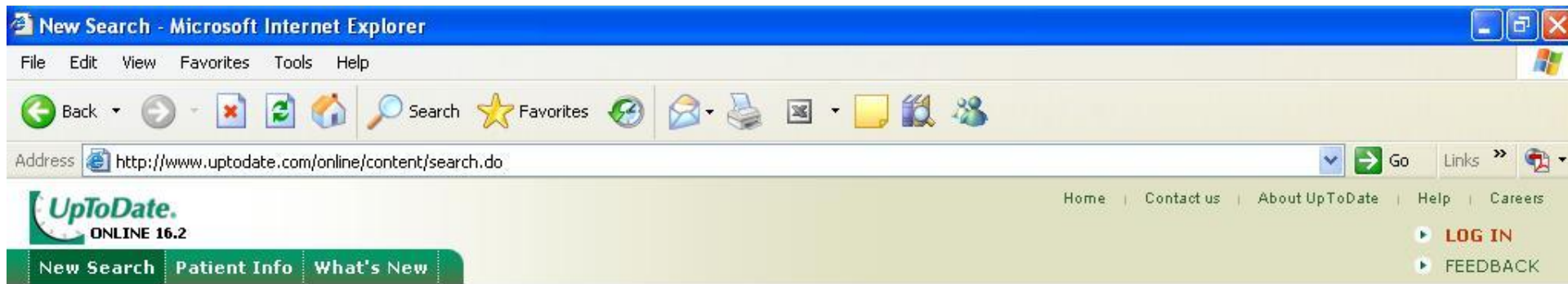
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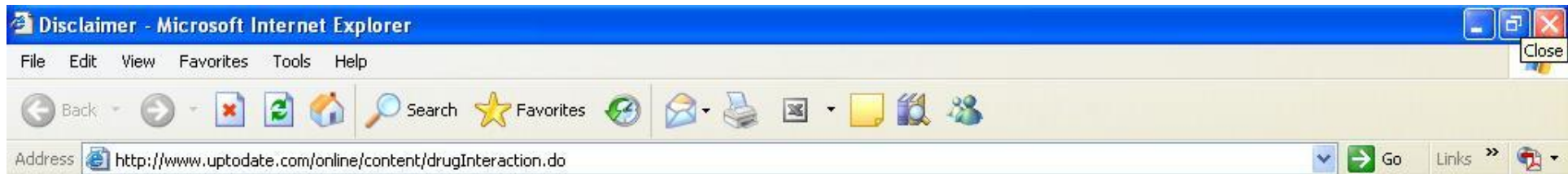
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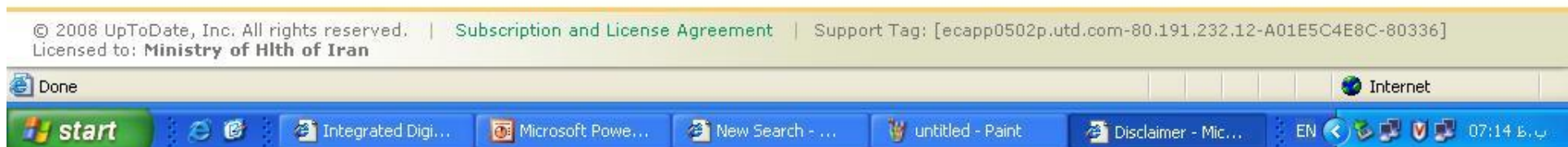


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# Welcome to Lexi-Interact™ Online

Lexi-Comp's Comprehensive Drug-to-Drug, Drug-to-Herb and Herb-to-Herb Interaction Analysis Program

Lexi-Comp ON-LINE™ Lexi-Interact™

Lookup

Enter item name to lookup

☒ [Cimetidine](#)

**Click on the drug name and...**

ical compatibility related to I.V. drug preparation

- Display complete list of interactions for an individual item by clicking item name.
- Add another item(s) [Lookup] to Analyze for potential interactions between items in the list.
- Remove item from the list by clicking the check mark next to the item name.

Lexi-Interact Online combines the world's literature and scientific understanding of drug interactions with a state-of-the-art electronic platform, providing an efficient way to ensure that adverse drug events don't compromise the care of your patients.

Review all interactions for a selected medication or enter a patient specific regimen to analyze for potential interactions. Additionally, you may select a drug interaction result to obtain detailed information on Patient Management, Interacting Members, Risk Rating, References and more.

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**ON-LINE**  
**Lexi-Interact™**

Lookup

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## Lexi-Comp Online™ Interaction Lookup

Only interactions at or above the selected [risk rating](#) will be displayed  
View interaction detail by clicking on link.

### Cimetidine

#### Interacting Categories

- [B] [Acyclovir-Valacyclovir](#)
- [C] [Alfentanil](#)
- [B] [Alfuzosin](#)
- [D] [Amiodarone](#)
- [B] [Antacids](#)
- [D] [Anticonvulsants \(Hydantoin\)](#)
- [D] [Antifungal Agents \(Azole Derivatives, Systemic\)](#)
- [D] [Atazanavir](#)
- [C] [Benzodiazepines \(metabolized by oxidation\)](#)
- [D] [Calcium Channel Blockers](#)
- [C] [Carbamazepine](#)
- [C] [Carmustine](#)
- [C] [Carvedilol](#)
- [B] [Cefditoren](#)
- [C] [Cefpodoxime](#)
- [C] [Cefuroxime](#)
- [D] [Cisapride](#)
- [D] [Clozapine](#)
- [C] [Codeine](#)
- [C] [CycloSPORINE](#)
- [C] [CYP1A2 Substrates](#)
- [C] [CYP2C19 Substrates](#)
- [C] [CYP2D6 Substrates](#)

A: ▼

X:

D:

C:

B:

A:

...see interactions

Risk rating

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**Lexi-Interact™**  
   
Enter item name to lookup.  
   
☒ [Cimetidine](#)  
☒ [Thioridazine](#)  

- Display complete list of interactions for an individual item by clicking item name.
- Add another item(s) [Lookup] to Analyze for potential interactions between items in the list.
- Remove item from the list by clicking the check mark next to the item name.

## Lexi-Comp Online™ Interaction Analysis

[Customize Analysis](#)


Only interactions at or above the selected [risk rating](#) will be displayed. A:   
View interaction detail by clicking on link.

**Cimetidine**  
☒ [Thioridazine](#) (Thioridazine)  
**Thioridazine**  
☒ [Cimetidine](#) (CYP2D6 Inhibitors)

**Date** December 14, 2008

**Disclaimer** Readers are advised that decisions regarding drug therapy must be based on the independent judgment of the clinician, changing information about a drug (eg, as reflected in the literature and manufacturer's most current product information), and changing medical practices.

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Lookup

Enter item name to lookup.

Analyze New List

☒ [Aspirin](#)

☒ [Cimetidine](#)

☒ [Tetracycline](#)

☒ [Thioridazine](#)

• Remove item from the list by clicking the check mark next to the item name.

## Lexi-Comp Online™ Interaction Analysis

[Customize Analysis](#)

Only interactions at or above the selected [risk rating](#) will be displayed. A:

View interaction detail by clicking on link.

**Aspirin**  
No interactions identified with others in the selection list.

**Cimetidine**

You can add as many drugs as you wish and choose among them

independent judgment of the clinician, changing information about a drug (eg, as reflected in the literature and manufacturer's most current product information), and changing medical practices.

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# Thank you