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Book Review

Fast Facts: Epilepsy

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"Fast Facts: Epilepsy" by M.J. Brodie, S.C. Schachter, P. Kwan, Health Press, Fifth Edition. 2012. ISBN 978-1-908541-12-3

This is the 5th edition of a popular handbook on epilepsy, first published in 1999, which updates the 4th edition published in 2009. Condensed into 140 pages, the book touches on epilepsy epidemiology, classification, diagnosis, and management. There is a comprehensive discussion of old and new antiepileptic drugs and very brief discussion of epilepsy surgery, therapeutic devices, and diets. Owing to the compact nature of the book, each of these topics is discussed only superficially, with the exception of antiepileptic drugs. The two chapters dealing with pharmacology – the general treatment approach as wel as details about specific drugs – are the greatest strength of this book.

Overall, the book is very readable, with a fresh, direct style. It is small enough to fit into a lab coat pocket, and I envision that those pockets will belong to medical students or perhaps resident physicians in fields related to neurology such as internal medicine, family medicine, pediatrics, or rehabilitation medicine. The book is clearly not intended for specialists in epilepsy or even, I suspect, general adult or pediatric neurologists. The content, with the exception of certain tables in the pharmacology chapters, is too simplified to be much use to physicians who regularly treat patients with epilepsy.

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Certain specific aspects of the text could be improved for better accuracy and readability. This edition continues to use the old International League Against Epilepsy classifications of seizures and epilepsies, rather than updating those classifications with the current, preferred nomenclature. Some important, newly recognized epilepsy syndromes of relevance to child neurologists are not discussed, such as fever-induced refractory epileptic seizures or fever-induced refractory epileptic encephalopathy in school-aged children. The authors continue to use the term "seizure disorder", disfavored in modern parlance as a nonspecific substitute for "epilepsy". Another unfortunate word choice is "devastating" with reference to Lennox-Gastaut syndrome; true, patients with Lennox-Gastaut often have major neurologic impairments, but labeling them as devastated does them a disservice. Many parents of my acquaintance would reel at their child being categorized as devastated. Facts about prognosis are welcome; opinions about quality of life are best omitted.

Moving beyond nomenclature, the authors state that temporal lobe epilepsy is "often" preceded by prolonged febrile seizures. Data as to how often this occurs would be informative here. There is little consensus on this point among authorities and it would be misleading for junior physicians to walk away with this conclusion. When discussing genetics, the authors state that the number of epilepsy genes is "set" to increase in coming years. Since the number of genes to be discovered is not on a predetermined schedule, the phrase "likely to" would be more accurate.

A useful chart on epilepsy etiology as a function of age is provided (Fig. 3.1). The chart would be more helpful clinically if it presented the age ranges in a format that did not make it seem like, for example, cerebral tumors occur only from age 25–65 but span a wider age range. Finally, on page 94 it is mentioned that vigabatrin works by "suicidal inhibition" of γ-aminobutyric acid transaminase. It would be informative to explain this term further.

In summary, this is a useful little compendium of the basic elements of epilepsy diagnosis and treatment. The critiques above are intended to improve the clarity and accuracy in future editions. I will continue to recommend this book to medical students and non-neurology trainees with enthusiasm.