MULTIPLE CHOICE QUESTION ON EPILEPSY SURGERY (CORRECT ANSWER IS IN BOLD AND UNDERLINED)

- Q.1 If the patient has failed 2 drugs in their appropriate combination and dosage, the likely chance of the third drug to control epilepsy would be
 - A) <5%
 - B) 10-20%
 - C) 20-30%
 - D) 40-50%
- Q.2 Which of the following facts about drug resistant epilepsy (DRE) in NOT true?
 - A) DRE occurs as a result of long standing acquired drug resistance
 - B) DRE is do novo and can be identified early in the course of disease
 - C) DRE may be suspected when the response to first drug fails
 - D) The only viable option for DRE is epilepsy surgery
- Q.3 Which of the following is NOT true about epilepsy surgery?
 - A) This is a surgery performed primarily for curing/controlling drug resistant epilepsy
 - B) MRI has to show a lesion for the surgery to be successful
 - C) Multi-modal imaging clearly identifies the epileptogenic networks
 - D) The 10 year seizure free outcome for mesial temporal sclerosis ranges from 50–60%
- Q.4 Which of the following is NOT a curative surgery?
 - A) Hemispherotomy
 - B) Multiple sub-pial transection
 - C) TPO disconnection
 - D) Lesionectomy
- Q.5 Which of the following is NOT true about hippocampal sclerosis surgery?
 - A) Recent meta-analysis has shown better outcome for a standard temporal lobectomy combined with amygdalo-hippocampectomy when compared to selective amygdalo-hippocampectomy
 - B) Hippocampus has to be resected upto the level of superior colliculus to ensure better outcomes
 - C) Both dorsal and ventral amygdala has to be excised to ensure a seizure free outcome
 - D) The adjacent structures like entero-rhinal cortex, uncus, para-hippocampal cortex also has to be excised
- Q.6 Which of the facts in NOT true about hemispherotomy?
 - A) Functional hemispherotomy was first described by Rasmussen
 - B) There are basically 2 techniques for hemispherotomy- per-insular and vertical trans-cortical
 - C) Hemispherotomy provides one the best outcomes in epilepsy surgery
 - D) The chief reason that the anatomical hemispherectomy was given up was due to post operative hydrocephalus

- Q.7 Which of the following is the most relevant indication for corpus callosotomy?
 - A) Lenox-Gestaut with drop attacks
 - B) DRE without any localization
 - C) Infantile spasms
 - D) Myoclonic jerks
- Q.8 Which of the following is NOT true about surgical aspect of focal cortical dysplasia?
 - A) Electro corticography is useful for localization and resection
 - B) Trans mantle sign is found in Type I Palmini
 - C) FCD may be associated with certain tumors
 - D) Hemi-megelencephaly is a very severe form of FCD
- Q.9 Which of the following is NOT true about vagal nerve stimulation?
 - A) VNS should be treated like another drug
 - B) VNS leads to about 50% seizure free outcome in about 50% of cases
 - C) VNS has similar indications as for copuscallosotomy
 - D) VNS may be also indicated in certain lesional cases
- Q.10 Which of the following is NOT true about SEEG?
 - A) It may be performed using both a robotic device and standard stereotactic frame even the former is more convenient
 - B) Has lesser morbidity than standard depth electrodes
 - C) Is performed using a burrhole
 - D) Since it is fitted using an anchor bolt, may be explanted easily

Dr. P. Sarat Chandra Professor Dept. of Neurosurgery All India Institute of Medical Sciences, New Delhi