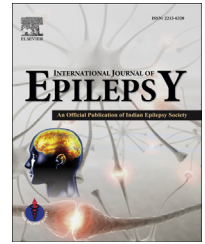


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## Editorial

# From the Editor's Desk



I wish to share with all the readers good news received from the President of ILAE and IBE. The part of message is produced ad verbatim”

“We are elated to inform you that the Resolution on Epilepsy was approved on May 26 by the World Health Assembly and it is now an official WHO document. The support was extraordinary, with 43 countries making supporting statements at the WHO Executive Board and/or at the Assembly (without counting the many who spoke on behalf of other countries in their region), 19 countries requesting to co-sponsor and other NGOs adding their support.

This is a huge success that could not be achieved without an extraordinary team work, with the essential contribution of the Joint ILAE-IBE Global Research and Global Outreach TF Chairs (Shichuo Li, Alla Guekht and Mary Secco). We would also like to thank Raad Shakir and his team at the World Federation of Neurology for their support before and during the World Health Assembly meeting.

We also give our special thanks to our Regional Commissions who encouraged all of our Chapters and Associations to contact their national representatives to the World Health Assembly. Finally, we would like to thank all ILAE Chapters, IBE Associations and individuals who worked so hard to make this possible.

The Resolution represents another important milestone in our fruitful partnership with WHO, for which we feel privileged. The next step is not to lose momentum. We need to capitalize on this achievement and initiate concrete actions at international and national level. Congratulations to all of you for the continued progress you are making in our fight against epilepsy”.

The current issue has a lead article on KAP about cysticercosis among people attending an Epilepsy Clinic in India by Pratyaksha Sankhyan et al. Enlarging the field of study to different parts of the world where NCC as a cause of epilepsy will be certainly helpful to improve the occurrence of this disease and improve hygienic conditions.

Video EEG is used to record the epileptic event along with electro-clinical syndrome of epilepsy. But this is expensive, time consuming and at times inconvenient. Mobile technology has come a long way to capture and record various events including paroxysmal activity like seizures: epileptic as well as non-epileptic. The article by Lakshmi Narasimhan et al titled “Application of Mobile phones in day to day care of People with Epilepsy” is very relevant in the current era. As per the statistics available till 2013, there are 6.8 billion mobile users in the world with the population of world being 7.01 billion (97 connections per 100 citizens). Even the PWE and their care givers bring video recording of the events spontaneously or when instructed. Many PWE do bring selfie of the event in the prodrome phase or where consciousness is not lost.

I hope you will enjoy reading this issue. Your valuable inputs are solicited.

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