PRESS RELEASE
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PERSERVERANCE, EDUCATION, AND HOPE FOR A CURE KEEP YOUNG MOTHER FOCUSED ON THE FUTURE

New Treatments for Epileptic Seizures in Development

WEST PALM BEACH, FL (April 2, 2008) – In December 2007, 23-three-year-old Veronica Pimienta gave birth to a beautiful baby boy. Twelve days later, she passed out while breast feeding her son. Surrounded by paramedics and totally confused, Pimienta had no idea what just occurred. She was told that she had a seizure and that she would be going to the hospital for further tests.

Results of a brain and CT scan came back normal. Pimienta was advised to begin taking an antiseizure medication but declined since she had never had a seizure before and was fearful of side effects. Another seizure occurred six months later, which woke her up out of a deep sleep with paramedics again at her bedside. This time, Pimienta was cognizant of her surroundings but was unable to speak.

"Nocturnal seizures are a form of epilepsy, which is a disorder caused by abnormal electrical activity within the brain that occurs while a person is asleep at night," says Fort Lauderdale epilepsy expert Eduardo Locatelli, MD. "Activity may range from awakening from sleep and violent movements of the arms and legs to biting of the tongue and loss of urine. Someone having a nocturnal seizure may also cry out or choke, as in the case of Veronica Pimienta."

Over the next year, Pimienta experienced seizures three times weekly. Neurologists told her that her seizures were either caused by stress or that she was experiencing postpartum depression. The physicians prescribed many strong antiseizure medications and antidepressants that caused severe side effects such as nausea and fatigue. One medication even caused her to loose her hair.

"I couldn't function or take care of my son," said Pimienta. "I never knew when a seizure would occur, and I was scared. My mother had to quit her job to take care of us."

Pimienta never lost hope. Determined to find help, she searched the Internet for information about epilepsy and seizures. She learned that to be properly evaluated and diagnosed, she would need to be admitted to an epilepsy monitoring unit where sophisticated digital technology monitors brain wave activity. Through the use of state-of-the-art electroencephalograph (EEG) and video equipment combined with MRI and PET scans, doctors might be able to identify the specific areas of Pimienta's brain where the seizures were coming from. She might be a candidate for a surgical cure.

“Sophisticated technology enables us to see abnormalities in the brain that are otherwise undetected,” said Dr. Locatelli. “Typical brain scans and MRIs are not always conclusive. Many times, we need to further investigate to find the source.”

Results from the epilepsy monitoring unit showed that there was a tiny spot located on the frontal lobe of her brain. She would need additional testing to qualify her as a surgical candidate.

Thrilled that she might have the opportunity to be cured, Pimienta and her family got in the car and drove 18 hours to the Cleveland Clinic in Ohio.

On February 29, 2008, surgeons performed brain mapping surgery, a technique that uses three-dimensional computer images of the brain to help determine the precise location of seizure activity in relation to functional areas of the brain. Pimienta was monitored for several more days, and on March 4, doctors took her back to surgery. It was determined that the abnormality located in the frontal lobe was too close to the area responsible for facial movements. If they operated, Pimienta would have facial paralysis. Unfortunately, brain surgery was not an option for her.

With a completely shaven head and two “train track scars,” as Pimienta calls them, she continues to persevere. When she returned to Florida, Dr. Locatelli changed her medication, which is showing promise of less frequent seizures and little-to-no side effects. Pimienta is thrilled to be feeling better.

“I’m feeling great,” she says. “I’m not sorry I went through this ordeal. I am confident that one day, something will be available that will cure my seizures, and I am determined to hang in until I find it.”

Neuropace, a new implantable neurostimulator in clinical trial, may be the cure that Pimienta has been waiting for. The device is implanted in the cranium and connected to one or two leads that are implanted near the patient's seizure focus. It is designed to detect abnormal electrical activity in the brain and respond by delivering electrical stimulation to normalize brain activity before the patient experiences seizure symptoms.

Pimienta is waiting for approval to participate in this study. If she is approved, she will be the first patient in South Florida to receive this treatment.

“I am so hopeful this will be my dream come true,” says Pimienta. “But, if not this treatment, I know that something else will be available to me sometime soon. I’m a believer.”

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About Florida Neuroscience Center

Located in Fort Lauderdale, Fla., Florida Neuroscience Center is a state-of-the-art private medical practice specializing in the diagnosis and treatment of epilepsy and other neurological conditions such as headaches and Alzheimer’s disease.

The Center's founder and medical director, Eduardo Locatelli, MD, MPH, holds triple boards in neurology, neurophysiology, and neuroimaging. He holds a master's of public health in addition to his medical doctorate degree. Dr. Locatelli has also earned certification as a Six Sigma champion. Dr. Locatelli is also the medical director of the epilepsy monitoring unit at Holy Cross Hospital.

Prior to opening Florida Neuroscience Center, Dr. Locatelli was the director of the epilepsy program, director of medical informatics, and chairman of the ethics committee at Cleveland Clinic Florida. He completed his internship, neurology residency, and fellowship at George Washington University. Additionally, he completed a fellowship at the prestigious National Institutes of Health. He is the co-author of Locatelli & Singh's Handbook of Neurology and many scientific papers.

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