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# Top 10 Epilepsy Research Priorities



### **EPILEPSY - WHAT'S AT STAKE?**

#### **LIVES**

**600,000** people in the **UK** and **65million worldwide** are currently living with epilepsy.

#### **BILLIONS**

In the UK, epilepsy costs the National Health Service (NHS) £2 billion every year.

#### **INEQUALITIES IN RESEARCH FUNDING**

\*Despite epilepsy being one of the most prevalent neurological conditions, funding for epilepsy research is disproportionately less than other neurological conditions:

- £82.5 million in research into dementia (patient population 850,000)
- £34 million in research into Parkinson's disease (patient population 145,000)
- £12.8 million in research into epilepsy (patient population)

<sup>\*</sup>Epilepsy Research UK 'A Life Interrupted' report Oct 2020

### WHAT IS THE UK EPILEPSY PRIORITY SETTING PARTNERSHIP?

#### **AIM: TO IDENTIFY THE TOP 10 PRIORITIES FOR RESEARCH INTO EPILEPSY**

- A once-in-a-generation opportunity for the entire epilepsy community to shape the future of research into epilepsy and drive greater research investment
- Rigorous James Lind Alliance methodology
- Collaborating with UK-wide epilepsy charities
- Supported by UK-wide and national partner organisations

#### Involving:

- People living with epilepsy, clinicians, families, carers, bereaved community
- Health and social care professionals
- People of all ages
- All four nations of the UK
- Minority & hard-to-reach groups



### **PARTNER ORGANISATIONS**

We engaged with over 100 partner organisations who helped share the survey with their supporters and memberships...

































**Quarriers**'







tsa

**DRAVET** Syndrome UK













## **STEERING COMMITTEE**

UK wide representation: epilepsy patient groups, people with lived experience of epilepsy, health care professionals



### **UK EPILEPSY PSP SCOPE**

#### The health research priorities of people with epilepsy to include:

- Causes: to include prevention (including the impact of epilepsy on antenatal and maternal health), comorbidities
- Diagnosis: to include access to health services
- Treatments: to include anti-epileptic drugs, surgery, treatment side effects, co-morbidities (including those as a consequence of treatment), and epilepsy that does not respond to treatment
- Clinical management of epilepsy: to include risk of epilepsy-related deaths (including Sudden Unexpected
  Death in Epilepsy SUDEP), service access, neurodevelopment, co-morbidities, social and psychological factors,
  and emerging areas such as epilepsy in older people
- Dissemination of research breakthroughs to influence epilepsy care, practice and policy: to include medical education and pathways to improved care

#### The PSP <u>excluded</u> from its scope questions about:

- Social research
- Health & Social funding
- Non-UK based research
- Functional seizures

## **UK EPILEPSY PSP TIMELINE**

Start

#### **SURVEY 1**

Nov- Feb: Collecting the priorities of the entire epilepsy community



**COMPLETE** 

# DATA PROCESSING

Nov-April: Processing the priorities and

demographic data



**COMPLETE** 

# i

March-June:
Draft summary
questions from the
submitted priorities

**SUMMARY** 

**QUESTIONS** 



COMPLETE

# EVIDENCE CHECK

June-July: Identify the longlist of 'unanswered' summary questions, excluding any 'answered' summary questions



**COMPLETE** 

#### **SURVEY 2**

August: Shortlisting survey



COMPLETE

#### End

# WORKSHOP LAUNCH & REPORTING

October 2022



**COMPLETE** 

September:

are decided

Top 10 priorities for

research into epilepsy

### **UK EPILEPSY PSP FIRST SURVEY**

The first survey received...

**Total responses** 

2,014

Launched: Thursday, 18th November 2021

**Closed:** Thursday 24<sup>th</sup> February 2022

**Total priorities (approx.)** 

5,418

## **SUMMARY QUESTIONS**

From the 5,418 priorities submitted in the first survey...



...research summary questions were drafted

#### **EVIDENCE CHECK**

#### Aim

Determine whether the summary research questions are...

Answered

□ Partially answered

☐ Unanswered

...by the existing literature

#### **Process**

- ✓ Check Canadian Epilepsy PSP evidence database updated & expanded from January 2020
- ✓ Check primary sources (eg Cochrane reviews, NICE guidelines, SIGN guidelines)
- ✓ Consult with Steering Group confirm summary questions identified as answered, unanswered or partially answered

## **SUMMARY QUESTIONS**

Following the evidence check...

...summary questions moved forward for prioritisation

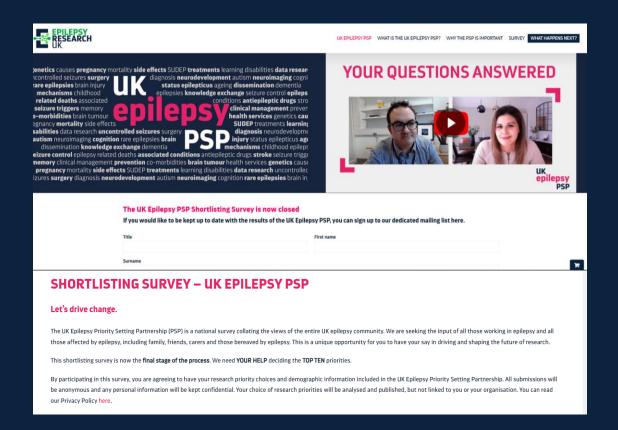
### **UK EPILEPSY PSP SHORTLISTING SURVEY**

The second, interim survey received...

**Total responses** 

2,798

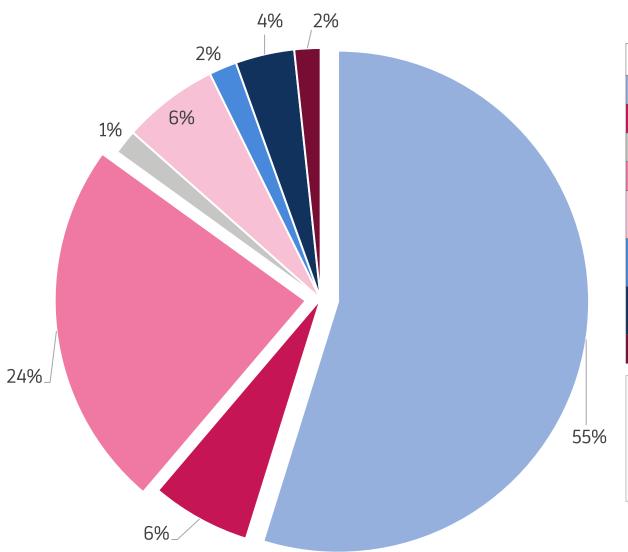
**Launched:** Wednesday 3<sup>rd</sup> August 2022 **Closed:** Monday 5<sup>th</sup> September 2022



## **Demographics**

## Q1: Which of the following best describes you?

REQUIRED: Please select ONE option that best applies.



Group	Response no.	% of response
Person with epilepsy	1560	54.81
Healthcare professional	182	6.39
Organisation representatives	45	1.58
Parent of someone with epilepsy	676	23.75
Family member or friend of someone with epilepsy	176	6.18
Caregiver or former caregiver of someone with epilepsy	51	1.79
Bereaved family member or friend of someone who had epilepsy	108	3.79
Other	48	1.69

#### Examples from 'Other':

- Had epilepsy
- Member of public
- Health services data specialist

These 'Other' responses have been assigned to one of the main groups.

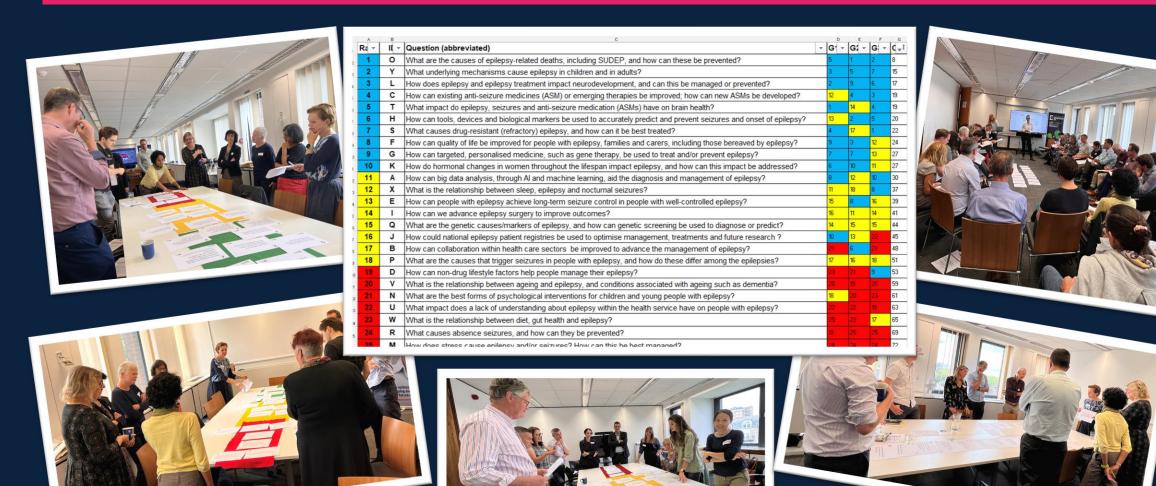
**Total No. of Participants: 2798** 

## **SUMMARY QUESTIONS**

From the 57 summary research questions longlisted...

...were shortlisted for discussion at the UK Epilepsy PSP Workshop

## **UK EPILEPSY PSP WORKSHOP**



# **WORKSHOP CONCLUSION – THE TOP 10**



## **UK EPILEPSY PSP TIMELINE**

Start

#### **SURVEY 1**

Nov- Feb: Collecting the priorities of the entire epilepsy community



**COMPLETE** 

# DATA PROCESSING

Nov-April: Processing the priorities and demographic data



COMPLETE

# SUMMARY QUESTIONS

March-June:
Draft summary
questions from the
submitted priorities



COMPLETE

# EVIDENCE CHECK

June-July: Identify the longlist of 'unanswered' summary questions, excluding any 'answered' summary questions



**COMPLETE** 

## **SURVEY 2**

**August:** Shortlisting survey



COMPLETE

# PRIORITY SETTING WORKSHOP

September: Top 10 priorities for research into epilepsy are decided



COMPLETE

End

# LAUNCH & REPORTING

October 2022



We are here

# FINAL RANKING

enetics causes pregnancy mortality side effects SUDEP treatments learning disabilities data resear diagnosis neurodevelopment autism neuroimaging cogni controlled seizures **surgery** are epilepsies brain injury status epilepticus ageing dissemination dementia mechanisms childhood epilepsies knowledge exchange seizure control epileps conditions antiepileptic drugs stro related deaths associated seizure triggers memory clinical management prever -morbidities brain tumour health services genetics cau gnancy **mortality** side effects **SUDEP** treatments **learnin** abilities data research uncontrolled seizures surgery diagnosis neurodevelopme utism neuroimaging cognition rare epilepsies brain injury status epilepticus ag dissemination knowledge exchange dementia mechanisms childhood epilep: izure control epilepsy related deaths associated conditions antiepileptic drugs stroke seizure trigg nemory clinical management prevention co-morbidities brain tumour health services genetics cause pregnancy mortality side effects SUDEP treatments learning disabilities data research uncontrolled zures surgery diagnosis neurodevelopment autism neuroimaging cognition rare epilepsies brain in

TOP 10

# 10

How can big data analysis, through artificial intelligence (AI) and machine learning, aid the diagnosis and management of epilepsy?

9

What causes drug-resistant (refractory) epilepsy, and how can it be best treated?



How can quality of life be improved for people with epilepsy, their families and carers, including those bereaved by epilepsy?

How do hormonal changes in women throughout the lifespan (eg puberty, pregnancy, menopause) impact epilepsy, and how can this impact be addressed?

How can tools, devices and biological markers be used to accurately predict and prevent seizures and the onset of epilepsy?

How can targeted, personalised medicine, such as gene therapy, be used to treat and/or prevent epilepsy?

4

How does epilepsy and epilepsy treatment impact neurodevelopment, and can this be managed or prevented?

What impact do epilepsy, seizures and anti-seizure medication (ASMs) have on brain health - including cognition, memory, learning, behaviour and mental health?

What underlying mechanisms cause epilepsy in children and in adults?

What are the causes and contributing factors of epilepsyrelated deaths, including Sudden **Unexpected Death in Epilepsy** (SUDEP), and how can these deaths be prevented?

#### **COMPARISON - CANADIAN EPILEPSY PSP TOP 10**

#### **Canadian Epilepsy PSP Top 10**

- 1. Can genetic markers be used to diagnose and treat epilepsy and seizure disorders?
- 2. What are the impacts of long-term use of anti-seizure drugs, the causes of side-effects of these treatments and how we can prevent the side effects?
- 3. What are the long-term impacts of seizures on a person's brain, and overall health and development?
- 4. How can the risk of SUDEP (Sudden Unexpected Death in Epilepsy) be reduced in people with epilepsy?
- 5. What is the most effective testing protocol for determining causes of seizures and/or a diagnosis of epilepsy or other seizure disorders and reduce time to diagnosis?
- 6. What are the brain changes, on a cellular level, that lead to seizure development?
- 7. How effective is surgical treatment for adults and children who experience seizures/epilepsy?
- 8. What causes memory problems associated with seizures? Can these memory problems improve over time and what are the best treatment options for memory loss in people who experience seizures?
- 9. Aside from anti-seizure drugs and some brain lesions, what causes behavioural changes in people who experience seizures? What is the best way to treat behavioral issues?
- 10. What is the efficacy (ie the effectiveness of reducing seizures) of adding a second antiseizure medication compared to changing to a different antiseizure medication? How can we determine which combination of antiseizure drugs are effective?

#### **UK Epilepsy PSP Top 10**

- 1. What are the causes and contributing factors of epilepsy-related deaths, including Sudden Unexpected Death in Epilepsy (SUDEP), and how can these deaths be prevented?
- 2. What underlying mechanisms cause epilepsy in children and in adults?
- 3. What impact do epilepsy, seizures and anti-seizure medication (ASMs) have on brain health including cognition, memory, learning, behaviour and mental health?
- 4. How does epilepsy and epilepsy treatment impact neurodevelopment, and can this be managed or prevented?
- 5. How can targeted, personalised medicine, such as gene therapy, be used to treat and/or prevent epilepsy?
- 6. How can tools, devices and biological markers be used to accurately predict and prevent seizures and the onset of epilepsy?
- 7. How do hormonal changes in women throughout the lifespan (eg puberty, pregnancy, menopause) impact epilepsy, and how can this impact be addressed?
- 8. How can quality of life be improved for people with epilepsy, their families and carers, including those bereaved by epilepsy?
- 9. What causes drug-resistant (refractory) epilepsy, and how can it be best treated?
- 10. How can big data analysis, through artificial intelligence (AI) and machine learning, aid the diagnosis and management of epilepsy?

## **NEXT STEPS – DISSEMINATION AND ACTION >>>**

PUBLISH TOP 10 RESEARCH PRIORITIES

October 2022



PROMOTE
PRIORITIES
WITH RESEARCH
& EPILEPSY
COMMUNITY



ACTION
PRIORITIES
THROUGH
COLLABORATION



INFLUENCE FUTURE RESEARCH INTO EPILEPSY



Launch: ILAE British Branch Conference October 2022

- ILAE & AES Conferences
- Research publications
- Roundtable discussions: unpacking the Top 10
  - Partner organisations

- Collaboration workshops
- Task force development

- Research strategy
- Evidence for increased investment

#### **UK EPILEPSY PSP PROGRAMME TEAM**



Epilepsy Research UK- Research & Involvement Team Anna Norton, Caoimhe Twohig-Bennett

EASTBIO Professional Internship Programme, University of Edinburgh Jack Armstrong, Adam Kovac

tics causes pregnancy mortality side effects SUDEP treatments learning disabilities data resear itrolled seizures **surgery** diagnosis neurodevelopment autism neuroimaging cogni status epilepticus ageing dissemination dementia epilepsies brain injury epilepsies knowledge exchange seizure control epileps echanisms childhood ated deaths associated conditions antiepileptic drugs stro zure triggers memory clinical management preven orbidities brain tumour health services genetics cau ancy **mortality** side effects SUDEP treatments learning **lities** data research **uncontrolled seizures** surgery diagnosis neurodevelopme sm neuroimaging cognition rare epilepsies brain injury status epilepticus age lissemination **knowledge exchange** dementia **mechanisms** childhood epileps re control epilepsy related deaths associated conditions antiepileptic drugs stroke seizure trigge nory clinical management prevention co-morbidities brain tumour health services genetics cause gnancy mortality side effects SUDEP treatments learning disabilities data research uncontrolled diagnosis **neuredevelenment** autism **neureimading** cognition **rare enilensies** brain in

# THANK YOU

**Questions?**UKepilepsyPSP@eruk.org.uk

