NEUROCYSTICERCOSIS AND EPILEPSY IN A COUNTY HOSPITAL IN HOUSTON, TEXAS

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Objective
To report the existence of patients with neurocysticercosis attending a tertiary care clinic in a county hospital in Southeast Texas.

Background
Neurocysticercosis is a major cause of epilepsy in developing countries. It is the most common parasitic infection affecting the central nervous system and is the primary reason that epilepsy is twice more common in endemic developing countries than in the United States. Given the high rate of immigration to southeast Texas, we sought to investigate the prevalence of neurocysticercosis in epilepsy patients receiving care at a county hospital in the city of Houston.

Methods
The authors performed a retrospective chart review of 576 unduplicated consecutive adult patients attending a tertiary care epilepsy clinic over twelve months at Ben Taub General Hospital in Houston, Texas. Patients were determined to have a diagnosis of neurocysticercosis based on typical neuroimaging findings and epidemiological criteria. No cases in non-Hispanics were identified.

Results
Of a total of 576 patients attending the epilepsy clinic from September 2004 to August 2005, 51% (n = 293) was Hispanic. Thirty three (11%) of 293 patients of Hispanic ethnicity had epilepsy and a history of neurocysticercosis.
Sixteen (48%) were refractory to medications, with seizures occurring on average 3.4 times a month (median = 2/month). Seventeen patients (52%) were well-controlled, with no seizures in the past 2 years. Early age of seizure onset was associated with medical intractability (p = 0.075).

Conclusion
Epilepsy attributed to neurocysticercosis occurs frequently in Hispanic patients of low socioeconomic status living in Southeast Texas, with prevalence rates higher than those generally reported in the United States, but somewhat lower than reported in endemic countries.
For the future, a prospective study would be useful to evaluate the risk factors for developing pharmacoresistance in these patients.

Age of Onset and Pharmacoresistance

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