ABSTRACT

**Background:** Proper classification of seizures is an important part of the epidemiology of epilepsy as it has important implications for estimation of burden of epilepsy as well as prognostic implications for patient management. The classification of seizures has had many methodological issues and the lack of utilization of electroencephalography (EEG) facilities in studies has yielded varying figures for seizure types. There are few studies in Nigeria which have classified seizures using the International League against Epilepsy (ILAE) classification. Furthermore, the relationship between seizure type and seizure control and the quality of life in epilepsy has also not been thoroughly assessed.

**Objective:** The aim was to explore the relationship between seizure type and seizure outcome. The objectives were to classify seizure types using the current ILAE classification system, and to determine the relationship between seizure type and seizure control and between seizure type and quality of life.

**Method:** This was a cross sectional descriptive study that assessed 150 patients who had been on antiepileptic medication for at least a year for seizure type, seizure control and quality of life using a proforma. Seizures were classified using the 2010 ILAE classification. Seizures were said to be controlled if patient had been completely seizure free for at least one year. Quality of Life was assessed using the QOLIE 10P (with scores > 50 as optimal and > 70 as high QOL).

**Results:** There were 86 males (57.3%) and 64 females (42.7%) giving a male: female ratio of 1.3:1. The most common seizure type was focal in 111 participants (74.0%) whereas 39 (26.0%) had generalized seizures. Of the focal seizures, 91 (60.7%) had focal seizures evolving to a bilateral convulsive seizure, 18 (12.0%) had focal seizures with impairment of consciousness while 2
(1.3%) had focal seizures without impairment of consciousness. Out of the participants with generalized seizures, 37 (24.7%) had generalized tonic-clonic seizures while 2 (1.3%) had myoclonic seizures.

Seizure control rate overall was 39.3%. Seizure control rate was higher in patients with generalized seizures (41.0%) compared to those with focal seizures (38.7%) but this was not a significant difference (p=0.80). The mean total QOLIE 10 score for study participants with focal seizures was 69.0 ± 26.0 while that for generalized seizures was 65.5 ± 25.3 but this was not statistically significant (p= 0.47).

**Conclusion:** Focal seizures were commoner than generalized seizures in this study. There was no significant difference in seizure control and quality of life based on seizure type.