

EVALUATION OF METABOLIC SYNDROME IN ADULT PATIENTS WITH EPILEPSY

Marina Amaral de Oliveira, Lucas Scotta Cabral, Pedro Abraham Cherubini, Carolina Machado Torres, Jose Augusto Bragatti, Marino Muxfeldt Bianchin

INTRODUÇÃO: Epilepsy is a common serious chronic neurologic disorder, affecting about 50 million people worldwide. Although numerous epidemiological studies have pointed out that treatment success rates, public health policies, education and psychosocial issues are key factors in Health-Related Quality of Life of patients with epilepsy, they have hardly addressed the impact of some common general medical conditions in patients with epilepsy. **OBJETIVOS:** Determine the performance of five internationally criteria used for the diagnosis of MetS among patients with epilepsy without previous cardiovascular events. Our study could provide best criteria for specific research in MetS or cardiovascular risk in epilepsy. **MATERIAIS:** Ninety-five epileptic adults were prospectively recruited over 22 weeks in a cross-sectional study. Metabolic syndrome was defined according to the National Cholesterol Education Program's Adult Treatment Panel III, American Association of Clinical Endocrinologists, American Heart Association /National Heart, Lung and Blood Institute International Diabetes Federation and the harmonized criteria (IDF/NHLBI/AHA/WHF/IAS/IASO). According to Rutjes, we arbitrarily defined the harmonized criteria as the standard reference. **RESULTADOS:** The prevalence of metabolic syndrome was significantly different according to each criterion used, ranging from 34.8%, as defined by AACE, to 49.4%, as defined by the harmonized criteria ($p < 0.005$). IDF criteria showed the highest sensitivity [S = 95.5% (95% CI 84.5-99.4), $p = 0.049$] and AACE criteria showed an undesirable low negative predictive value [NPV = 75.4% (95% CI 68.5-77.7), $p = 0.049$]. Our findings suggest that metabolic syndrome might be highly prevalent among selected adult patients with epilepsy. Correct evaluation of these patients can improve the rates of detection of metabolic syndrome and foster primary prevention of cardiovascular events, at least in some groups of patients with epilepsy. In our view, structured cardiovascular risk assessment should be incorporated into the routine care of adult patients with epilepsy.