through Emergency Medicine Department (EMD) between January 2015 and December 2018. Data collected included: demographic data, seizure semiology, neurologic findings, and EEG and MRI findings. In each patient, based on the clinical and investigative data the new epilepsy definition was applied.

**Results**: During the study period 340 patients with new-onset unprovoked seizure were admitted through EMD to NICU. Seizure semiology was focal onset in 221 (65%) and unknown onset motor in 119 (35%). MRI showed structural lesions associated with high seizure recurrence risk in 208 (61%) patients: post stroke gliosis 112 (54%); tumor 39 (18.7%); gliosis 39 (18.7%); mesial temporal sclerosis 4 (2%); and focal cortical dysplasia 14 (7%). In the remaining 132 patients, EEG showed interictal epileptiform discharges (IEDs): focal in 13 (9.8%) and generalized in 12 (9%). Based on this data, 233 (68.5%) patients met the new epilepsy definition:
(1) genetic generalized epilepsy (JME) in 12 (5%) and
(2) epilepsy due to structural pathology/IEDs with high seizure recurrence risk in 221 (95%). The remaining 107 (32.5%) patients had no markers for high risk of seizure recurrence.

**Conclusions**: This study suggests that new definition of epilepsy can be applied in two-third of patients with new-onset unprovoked seizure. Structural imaging helps in determining the high seizure recurrence risk.

were classified in four groups according to the prominent semiological finding: Hypermotor, Motionless, Total lack of Responsiveness and the presence of Aura. Other symptoms were also included.

**Results**: 379 Video-EEG studies were performed during the period studied, 53p (14%) met the inclusion criteria, 42 (79%) women. A total of 259 PNES were analyzed; 34p were classified in the PNES-only group and 19 in the PNES and Epilepsy group. Mean age was 33 yr (15 to 83). Mean onset of PNEs was 26 yr. Average time before diagnosis was 6 yr. First event was recorded after 16 hr in VEEG (1–90 hr). Number of events was 4 (1 to 30). As for the treatment, 98% were on medication with AEDs, mean 4 AED's (1 to 7). According to the semiological characterization, 40p (75.5%) presented 137 Hypermotor PNES, followed by Aura in 36p (68%) presenting 53 PNES. The Total lack of Responsiveness type was present in 15p (28.3%) with 32 PNES, and Motionless type in 11p (20.7%) with 20 PNES.

**Conclusion**: VEEG is the study of choice for the diagnosis of PNES, since it is a dependent operator study, defining the semiological features of PNES results in a most precise diagnosis. In our study we found that most of the patients presented with multiple crisis with non-stereotyped events. The most frequent clinical presentation was hypermotor PNES. Thoroughly observation of VEEG recordings by trained personal is essential to accomplish an accurate diagnosis of PNES.

# TUESDAY 25 JUNE
## ADULT EPILEPTOLOGY 3

## P450 | Semiological Features Of Psycogenic Nonepileptic Seizures: Insights From Video-EEG Monitoring In Epilepsy Reference Center In Buenos Aires, Argentina

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**Purpose**: Categorize semiological features observed in psychogenic nonepileptic seizures (PNES) during Video-EEG (VEEG) monitoring to improve clinical diagnosis.

**Method**: Retrospective observational study in patients(p) admitted to VEEG during 2014–2018. Recording of patients with PNES, with or without epilepsy, were reviewed. The semiology of each event was visually analyzed and entered into a database, in which the signs and symptoms

## P451 | Risk Factors For Drug-Resistant Epilepsy In Adult Patients With Tuberous Sclerosis

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**Purpose**: Epilepsy is one of the most common clinical manifestations in patients with tuberous sclerosis and a large number of tuberous sclerosis patients would develop drug-resistant epilepsy. Previous studies were caring about children, while the research of the manifestations in adult patients are not clear. We aimed to identify risk factors for drug-resistant epilepsy in adult patients with tuberous sclerosis.

**Methods**: We included 312 adult patients with tuberous sclerosis from Western China and collected the clinical manifestations, treatment therapy, and prognosis data of these patients. Drug-resistant epilepsy was defined as uncontrolled seizure despite at least 2 appropriate anti-epileptic drugs were used (simultaneously or successively).

**Results**: 243 (78%) patients with tuberous sclerosis had a positive seizure history, 178 (69%) of them had focal epilepsy