

European Survey to explore the impact of epileptic encephalopathy KCNQ2 in the daily lives of affected patients.

An initiative of:

- EUROPEAN KCNQ2 ASSOCIATION
- KCNQ2 Einblick, Beratung, Netzwerk Germany
- ASOCIACION KCNQ2 ESPANA
- KCNQ2 FRANCE
- DRAVET ITALIA ONLUS

With the support of CREP Centro Ricerca Epilessie in età Pediatriche - Verona

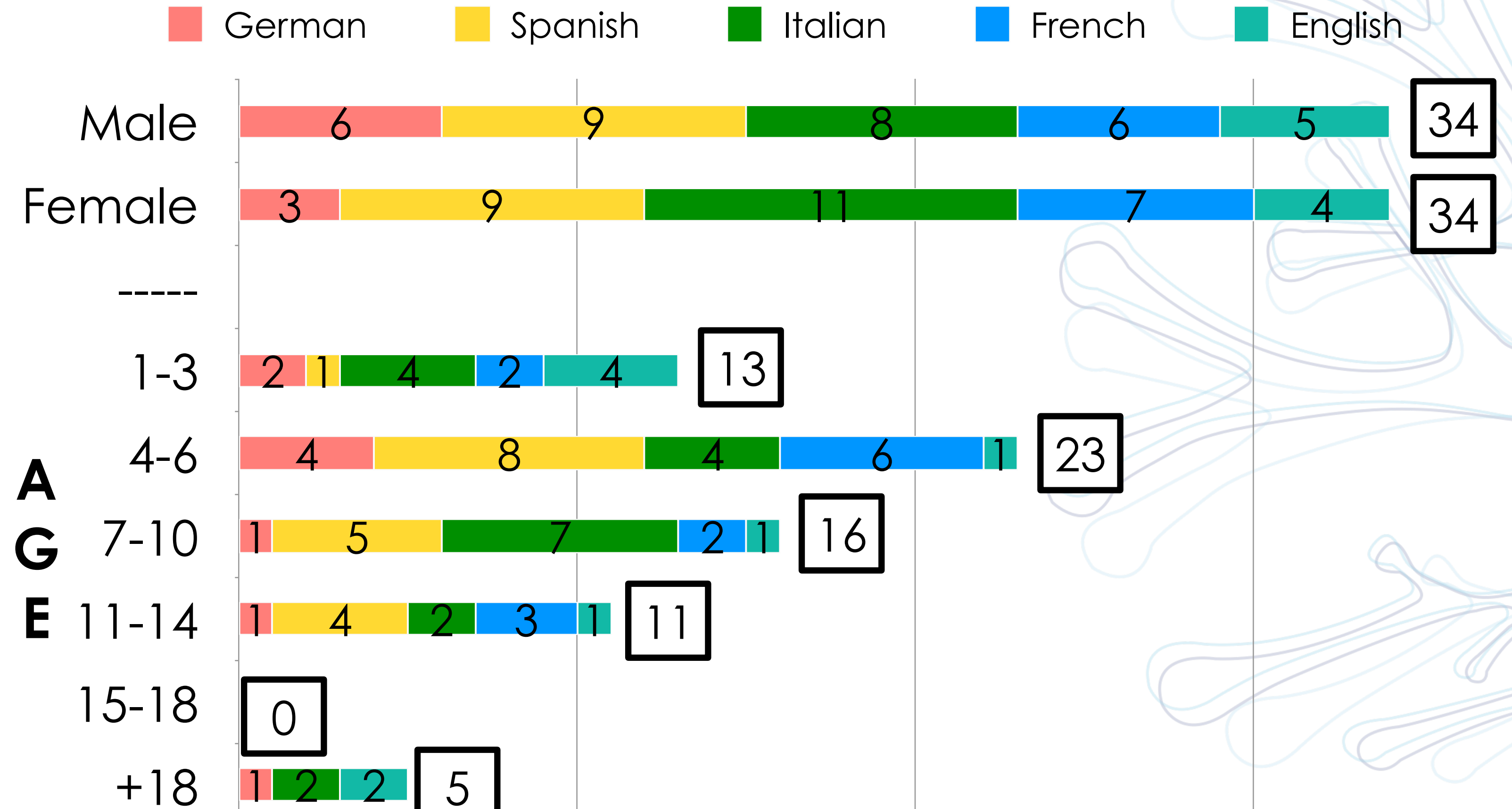
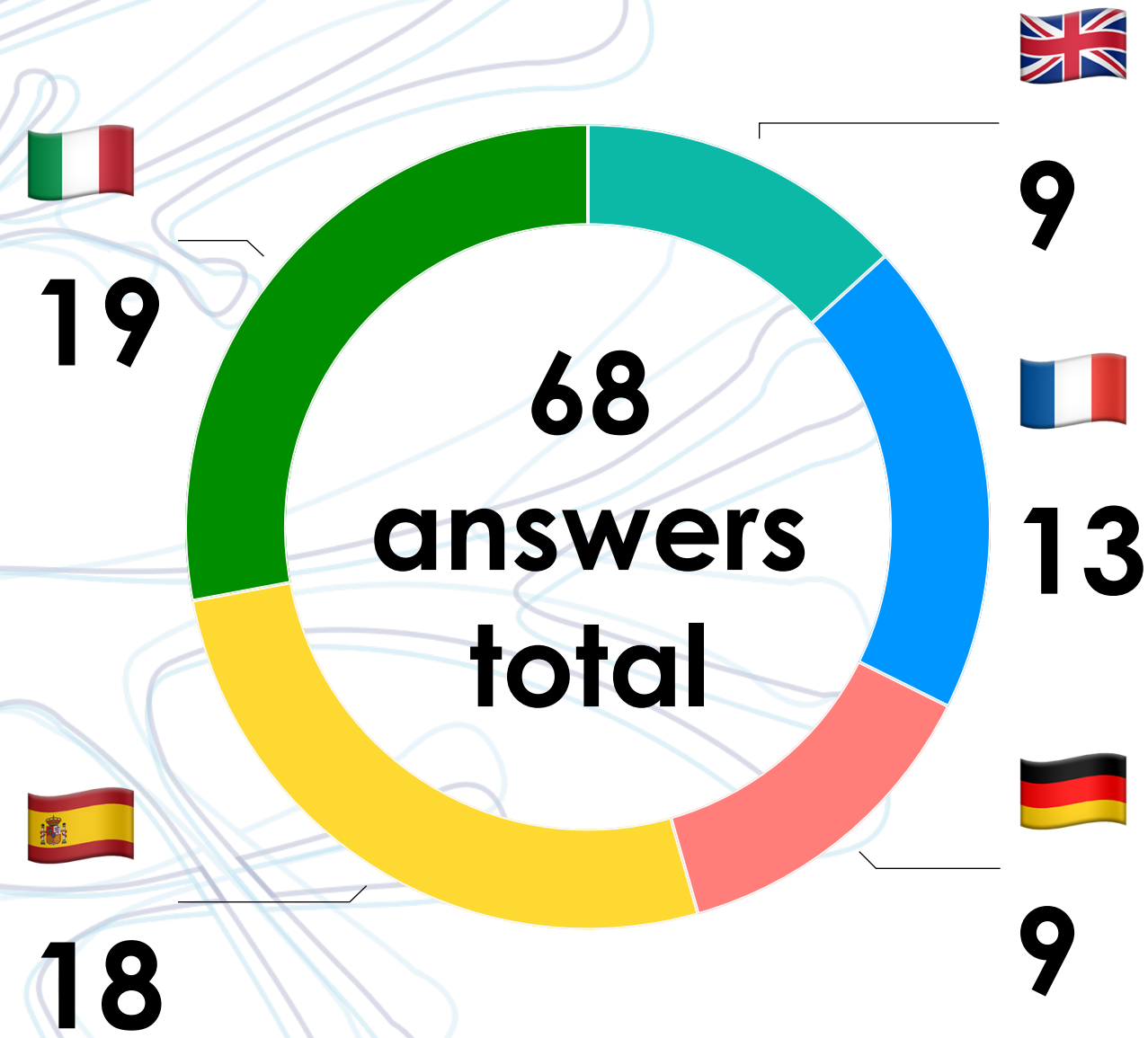
Preliminary Data Survey KCNQ2

Survey translate in 5 languages ad disseminate in all word by the national associations.

Italian Version: divided in 2 times (2020 December 20 to 2021 January 10 and 2021 February 10 to March 30.)

English French, German and Spanish Version opened from 2021 February 10 to March 30.

Preliminary Data Survey KCNQ2





Centro Ricerca per le Epilessie
in età Pediatrica



Preliminary Data Survey KCNQ2

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What we already know about KCNQ2 Encephalopathy:

- It's a Developmental and Epileptic Encephalopathy with seizures starting in first days of life

SEIZURES 65/68 ONSET AGE

Within the first 10 hours of life

The first day

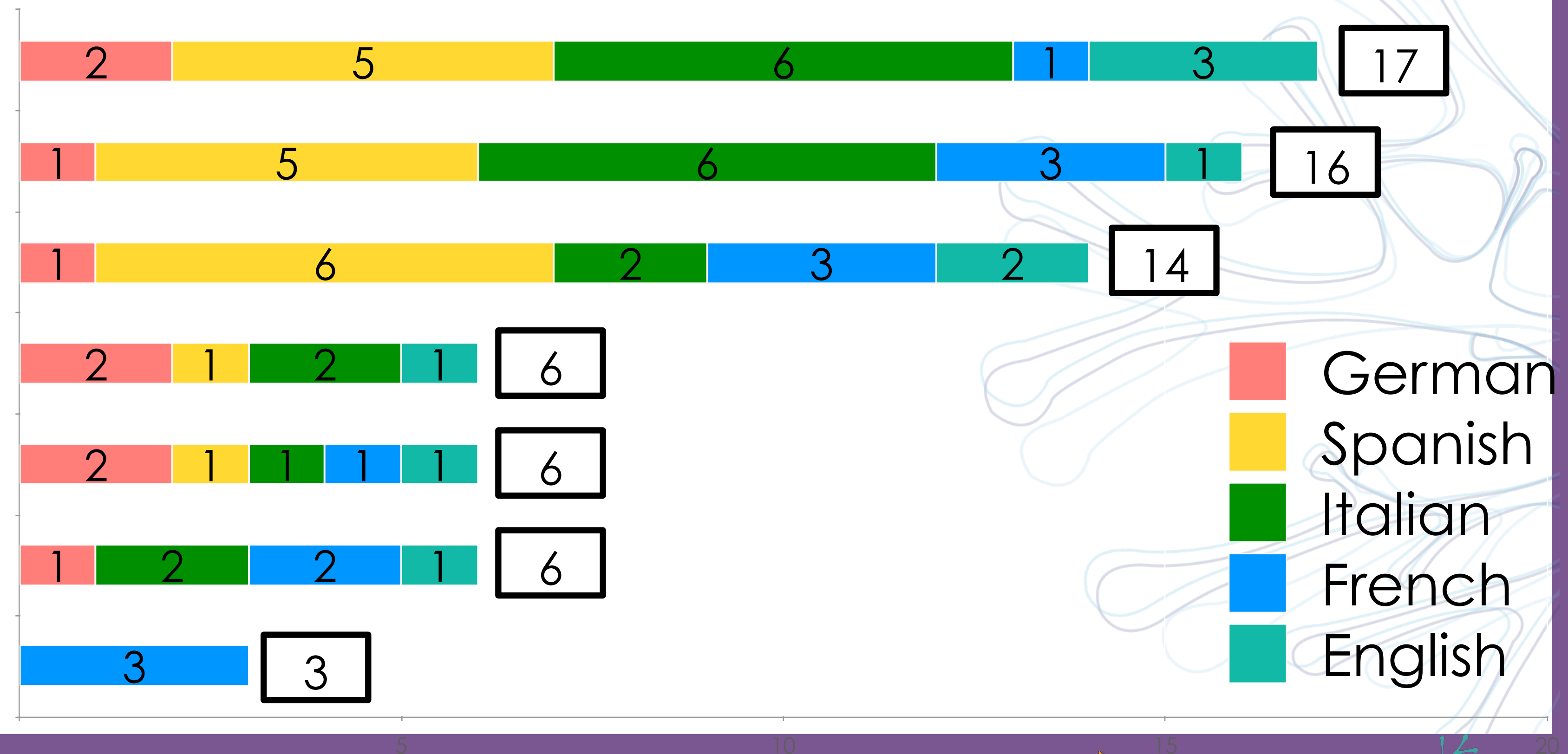
The second day

The third day

Within the first 10 days

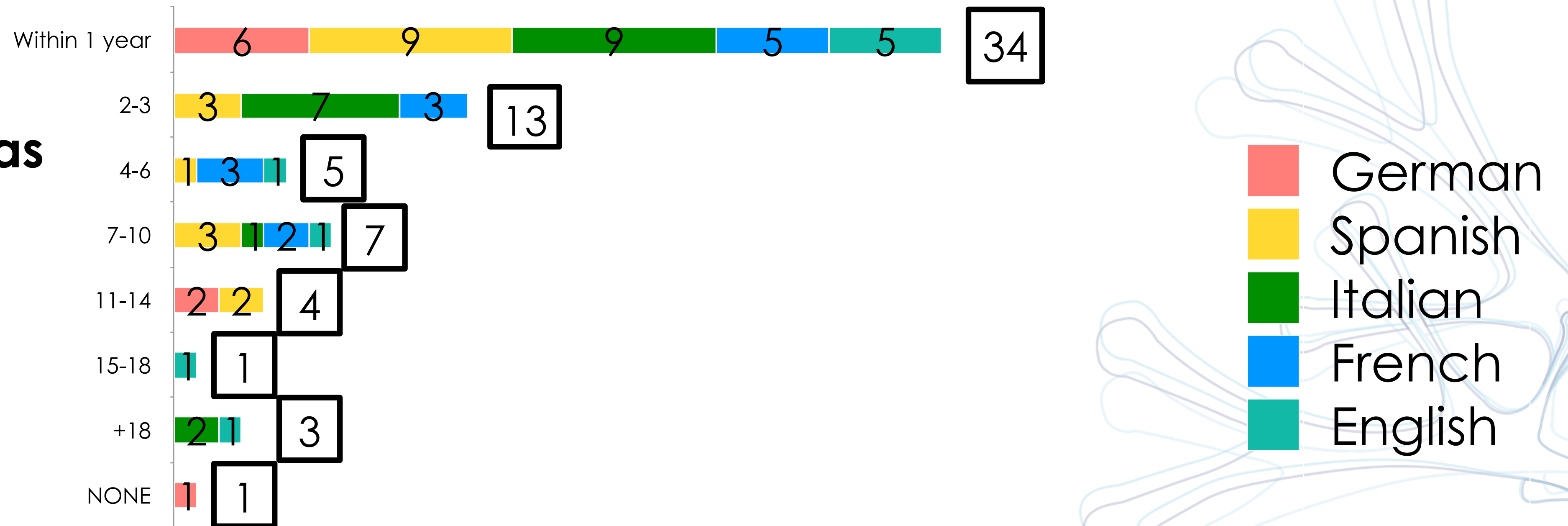
After the first 10 day

NO SEIZURE

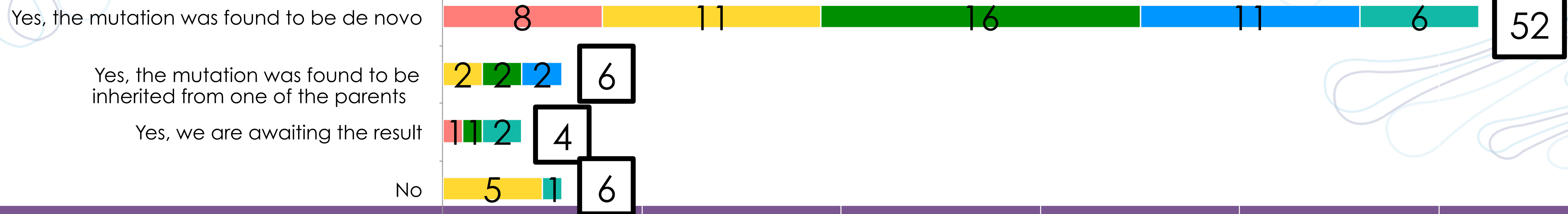


What we already know about KCNQ2 Encephalopathy: - Mutation is almost always *de novo*

At what age was the genetic diagnosis performed?



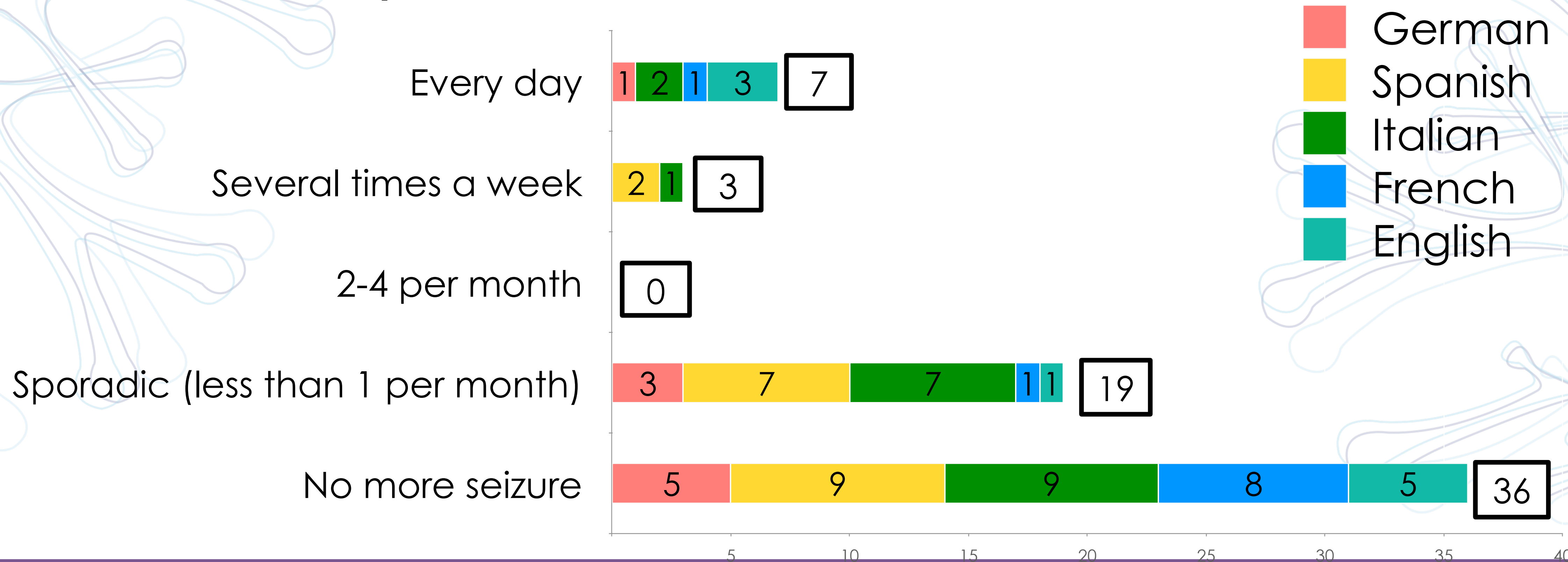
Have genetic investigations been extended / carried out to parents as well?



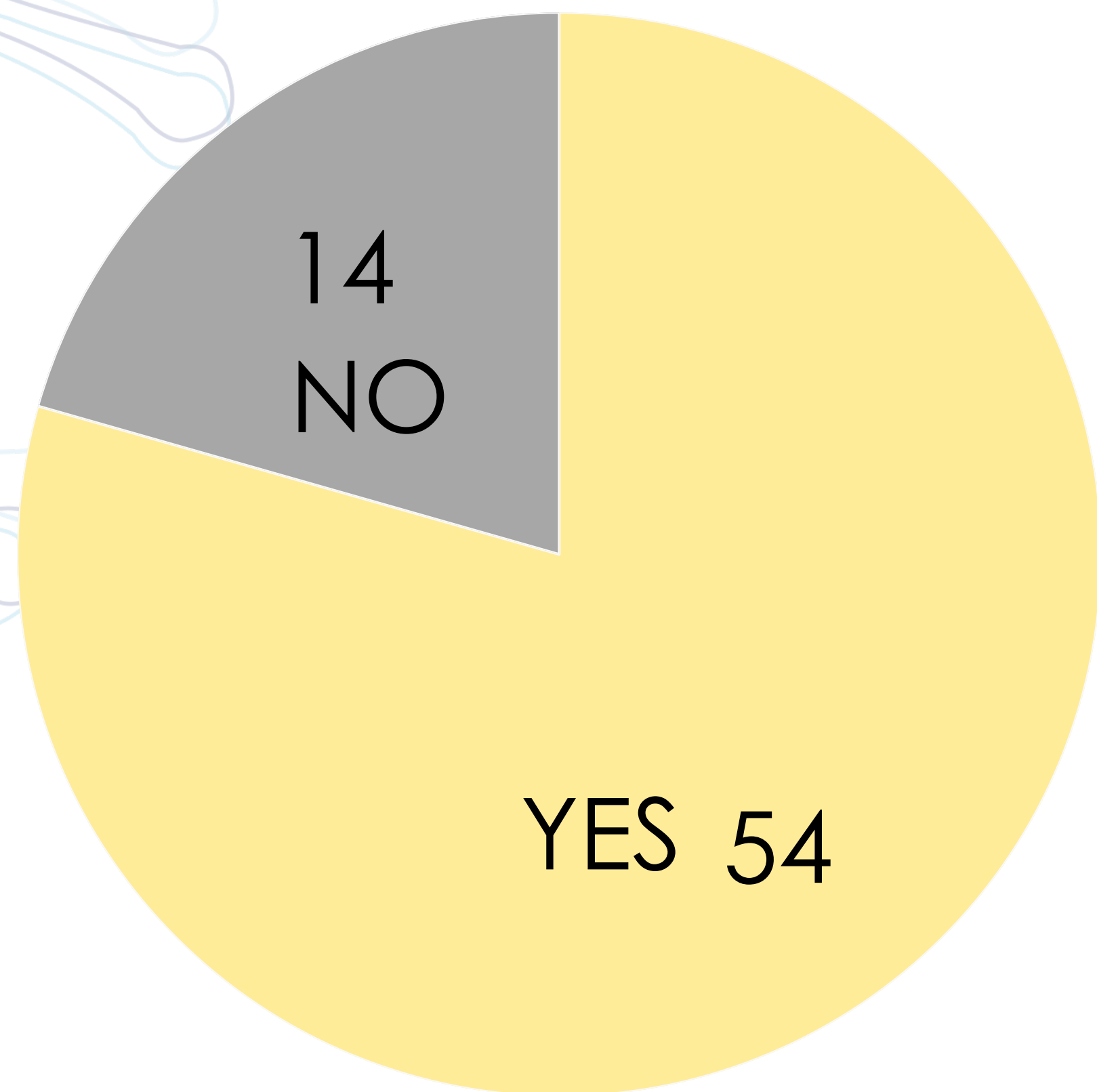
What we already know about KCNQ2 Encephalopathy:
- Seizures usually stop during first 4 years of life

MEDIAN AGE 6

How often do seizures occur today?
In 65 pts with seizures



Comorbidities variously associated 54/68 pts



- Gastrointestinal complications
- Orthopedic complication
- Urinary problems
- Breathing problems
- Dermatological problems
- Endocrinological problems

In conclusion..

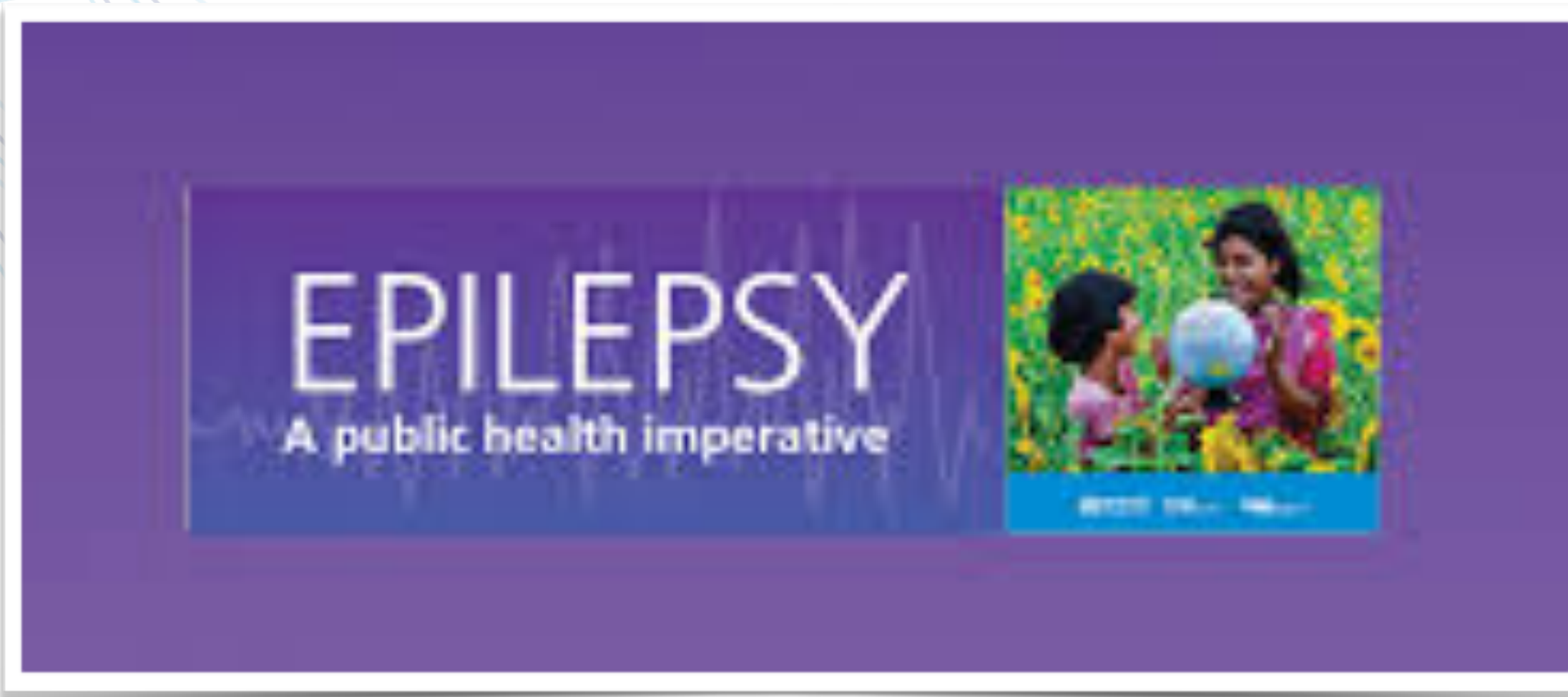
- This is the largest family survey performed on patients with KCNQ2 encephalopathy.
- It represents a unique chance to collect information regarding daylife of individuals affected by this rare condition.
- By analysing acquired data in different groups of age, we can try and delineate natural history (epilepsy trend, neurological outcome, personal autonomies)
- This would help to:
 - Individuate possible subgroups of patients with worst/better outcome
 - Define treatment outcomes (rehabilitation/pharmacological/...gene therapy?) other than seizures
 - Raise the attention on the family burden.

Thanks for the attention



SEVENTY-THIRD WORLD HEALTH ASSEMBLY
Agenda item 11.6

A73/A/CONF./2
9 November 2020



Global Actions on epilepsy and other neurological disorders

**Draft resolution proposed by Belarus, Bhutan, China, Colombia,
Eswatini, the European Union and its Member States, Guyana,
Iceland, Jamaica, Philippines, Russian Federation**