Dear Editors-in Chief,

We have the pleasure of submitting the manuscript “Outcomes of epilepsy surgery for refractory temporal lobe epilepsy in older patients” to your journal. This is a clinical research paper reflecting the postsurgical seizure and cognitive outcomes in older patients with intractable temporal lobe epilepsy (TLE). There is skepticism about outcomes in older patients treated with surgery related to the presence of multiple comorbidities, preexisting cognitive decline and longer seizure duration. Few studies report postsurgical outcomes in older adults and the available data are based on small number heterogeneous samples.

We conducted a retrospective analysis on selected from computer database 18 patients aged 55 or older to assess the efficacy and tolerability of the procedure. 78% achieved Engel class I outcome over a mean follow-up period of 4.2 years. We did not find a measurable effect of disease duration on postsurgical outcome. Postsurgical neuropsychological evaluation showed expected decline in verbal abilities in patients who had undergone dominant resection.

Our results indicate that epilepsy surgery is well tolerated, safe and effective in older patients with refractory TLE.

We hope that our manuscript will add important insights concerning the management of refractory epilepsy in older patients.

Sincerely,

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