

# Non-Invasively recorded high frequency oscillations as biomarkers in focal epilepsy

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|------------------------------|----------------------------|
| <b>Ethical review</b>        | Approved WMO               |
| <b>Status</b>                | Recruitment stopped        |
| <b>Health condition type</b> | Seizures (incl subtypes)   |
| <b>Study type</b>            | Observational non invasive |

## Summary

### ID

NL-OMON44429

### Source

ToetsingOnline

### Brief title

MEG-EEG HFO Study

### Condition

- Seizures (incl subtypes)

### Synonym

convulsion, epileptic fit, Epileptic seizure

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Universitair Medisch Centrum Utrecht

**Source(s) of monetary or material Support:** ZonMW veni,Epilepsiefonds

## Intervention

**Keyword:** Focal epilepsy, High frequency oscillations (HFOs), MEG, Scalp EEG

## Outcome measures

### Primary outcome

- The number of patients with HFOs with each technique (corticography, scalp EEG, MEG)
- The number of HFOs per minute with each technique
- The brain areas showing HFOs with each technique

### Secondary outcome

- The number of seizures before and after surgery
- The results of cognitive tests before and after surgery

## Study description

### Background summary

High frequency oscillations (HFOs) are proposed as biomarker for epileptogenicity, but HFOs are currently used in intracranial electroencephalography (iEEG). Very recent studies show that HFOs can also be measured non-invasively using scalp EEG and magnetoencephalography (MEG). This discovery needs more research before we can draw conclusions on HFOs. Non-invasive HFO analysis will improve early identification of a focal epilepsy generator, and might be used for monitoring of disease activity. Hypothesis: HFOs recorded non-invasively with MEG and scalp EEG are biomarkers of ictogenesis and disease activity like iEEG HFOs.

### Study objective

Primary objective of this study is to improve identification of epileptic HFOs in EEG and MEG, by comparing them to HFOs in corticography. Secondary objectives are to study the predictive value of non-invasively recorded HFOs for disease activity and cognitive functions.

## Study design

Prospective observational cohort study

## Study burden and risks

In this study, patient will undergo pre and post operative simultaneous EEG-MEG recordings and pre- or intraoperative corticography. However, the corticography is done in all patients regardless of our research. The only extra burden for our patients would therefore be the simultaneous scalp EEG-MEG recording (two times).

### Risks

MEG and EEG are both safe recording techniques of brain signals, there is no risk involved in undergoing an MEG-EEG.

### Burden

- Patients would have to travel to the VU medical center in Amsterdam for the MEG-EEG recording, because there is no MEG available in the UMCU.
- MEG-EEG recording can be uncomfortable because patients need to lie practically motionless while the machine is recording brain signals. We expect this to be too demanding for children under six. We will also exclude older patients for whom this is expected or appears to be too much.

### Benefit

A benefit of undergoing MEG-EEG is that patients get an extra test in their pre and post surgical work-up.

Patients can not count on above mentioned benefit, but considering the very low risk and small burden, we think it is ethically justified to perform this study.

## Contacts

### Public

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### Scientific

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## **Trial sites**

### **Listed location countries**

Netherlands

## **Eligibility criteria**

### **Age**

Adolescents (12-15 years)

Adolescents (16-17 years)

Adults (18-64 years)

Children (2-11 years)

Elderly (65 years and older)

### **Inclusion criteria**

- Patients have refractory focal epilepsy (not responding to treatment with anti-epileptic drugs) and are candidates for epilepsy surgery in the University Medical Center Utrecht with pre or intra operative corticography (measuring brains signals during surgery).
- Adults and children over six
- EEG and MEG compatible

### **Exclusion criteria**

- Patients who undergo epilepsy surgery outside the UMCU, or without pre or intra operative corticography
- Patients with metal implants (not MEG compatible)
- Patients under six and other patients unable to lie down or sit motionless for at least 15 minutes (not MEG compatible)

## **Study design**

## Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 14-08-2015

Enrollment: 30

Type: Actual

## Ethics review

Approved WMO

Date: 18-03-2015

Application type: First submission

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Approved WMO

Date: 03-06-2015

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Approved WMO

Date: 14-06-2016

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Approved WMO

Date: 25-04-2018

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

## Study registrations

## **Followed up by the following (possibly more current) registration**

No registrations found.

## **Other (possibly less up-to-date) registrations in this register**

No registrations found.

## **In other registers**

| <b>Register</b> | <b>ID</b>      |
|-----------------|----------------|
| CCMO            | NL50715.041.14 |