Infantile Spasms

Infantile spasm (IS) is a rare seizure (*convulsion*) disorder that begins in the first year of life. The spasms are described as sudden brief contractions of one or more muscle groups. These spasms may be followed by a longer (less than 10 seconds) stiffening phase. The spasms may cause the child's body to either:

- Hunch forward.
- Suddenly arch and fling themselves backwards (*salaam attacks*).

The spasms occur in clusters of 5-10 jerks within 1-2 minutes. The clusters tend to occur soon after waking up from sleep. A test called an electroencephalogram (EEG) will be given. An EEG:

- Evaluates the electrical activity of the brain.
- Is used to confirm the diagnosis.
- Will provide a specific EEG pattern called hypsarrhythmia to show IS.

West Syndrome describes patients who have infantile spasms, hypsarrhythmia EEG pattern, and mental retardation.

CAUSES

Although the cause of infantile spasms cannot always be found, common known causes are:

- Lack of oxygen at birth.
- Trauma or injury to the brain.
- Infections in the brain.
- Genetic disorders (problems with the DNA) such as tuberous sclerosis.

TREATMENT

The steroids are considered to be the most helpful seizure or anti epileptic medicine for infantile spasms. These steroids are different from the ones that the athletes abuse. Common side effects of the steroids include:

- Irritability.
- Weight gain.
- An upset stomach.
- Increased blood sugar levels.
- High blood pressure.

Your doctor will watch for these side effects especially in the first few days on the medications. Sabril, Depakote and Topamax have also been used with some success especially in certain specific groups of children.

LONG TERM OUTCOME

Infantile spasms is one of the most devastating seizure disorders affecting infants. The majority of children with infantile spasms have long term medical problems including epilepsy, developmental delay and cerebral palsy.

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