Benign rolandic epilepsy (BRE)



or Benign epilepsy with centrotemporal spikes (BECTS)

What is Benign Rolandic Epilepsy (BRE)?

- BRE is the most common form of epilepsy seen in childhood. It tends to run in families. Twice as many boys have it as girls.
- Children with BRE have partial seizures. Partial seizures are focal movements of the face, arms, or legs. These seizures may cause drooling and/or make your child unable to talk. A full body shaking seizure may follow.
- Normally these seizures do not happen often. Often, they are caused by lack of sleep.
- These seizures normally happen just after falling asleep or just before waking up.
- Most children outgrow the seizures by their teen years.

How is it diagnosed?

The description of the seizures is very important in diagnosing BRE. An EEG, while awake and asleep, is done to look at brain wave activity. This helps to confirm the diagnosis. Your child may also need an MRI scan to look for any brain abnormality that could be causing the seizures.

How is it treated?

Medicine can be used to treat seizures. Your child's provider will tell you if medicine is recommended for your child. Seizure medicine doses will be slowly adjusted until a level of seizure control is found. Regular lab work may be done to measure medicine levels and to check for possible side effects.

Your child may still have seizures while taking seizure medicine. It is important to know how to care for your child during a seizure. It is very important to make sure that your child's environment is safe. Since most seizures in BRE happen while falling asleep or when waking up, it is important that there is nothing in the bed or bedroom that could hurt your child. Your child should not sleep on the top bunk of a bunk bed.

Where to get more information

American Epilepsy Society
www.aesnet.org
342 N. Main Street
West Hartford, CT 06117-2507

Epilepsy Foundation of America www.efa.org

ALERT: Call your child's doctor, nurse or clinic if you have any questions or concerns or if your child:

- Is having more seizures than before.
- Is not able to take the medicine that is prescribed.
- Has special health care needs that were not covered by this information.

This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.