

What is Corpus Callosotomy?

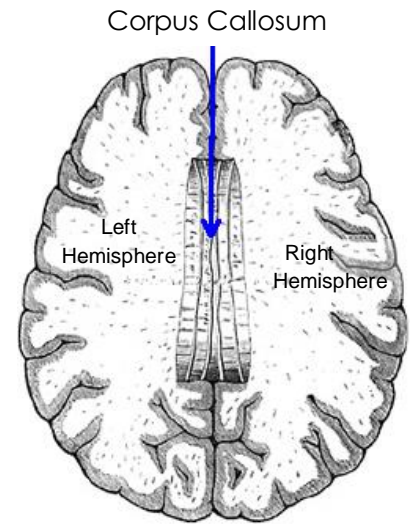
In this surgery, the corpus callosum is cut. This surgery is used for children who have generalized seizures, especially drop attacks. It:

- may reduce how often your child has seizures.
- may reduce how severe your child's seizures are.
- will not cure your child's epilepsy or end your child's seizures.

What is the corpus callosum?

The brain is divided into two sides. The sides are called the right and left hemispheres. The two sides are connected by a band of nerves called the corpus callosum. It is like a bridge that lets the two sides share information. It is not the only bridge the brain has for sharing information, but it is the main one.

By cutting the corpus callosum the abnormal electrical discharges cannot spread from one side to the other.



How is the surgery done?

A surgeon who specializes in brain surgery, called a neurosurgeon will do the surgery.

- A small piece of your child's skull at the top of the head is removed.
- A piece of the membrane that covers the brain, called dura, is gently pulled back.
- A surgical microscope and special instruments are used to cut the corpus callosum. Nothing is taken out.
- When the surgery is done, the dura is closed and the piece of skull is put back. The skin is closed using stitches.

After surgery your child will go to the recovery room and then to the Intensive Care Unit (ICU) for 1 to 2 nights. When your child is more alert, they will go to a regular hospital room. Most children will be ready to go home in about 6 to 8 days.

Are there side effects?

There are some common side effects after this surgery. All of them will improve. They may cause recovery to take longer. This could mean that your child will be in the hospital longer. Side effects may include:

- **Fever:** This is common in the first 3 days after surgery. A fever that happens this soon after surgery does not mean infection.
- **Long period of decreased consciousness:** This means it will be hard for them to stay awake and alert. It can last up to two weeks after the surgery but more often lasts less than 4 days. It can be very hard to see your child like this. Remember, it is temporary. It will get better.
- **Weakness on the left side of the body:** This can last for quite a few days and can involve the left side of the face, arm and leg.
- **Decrease in hunger and thirst:** In rare cases a feeding tube may be needed. It lets us give nutrition until your child is ready to eat. The tube goes in the nose and down to the stomach.

Most often, the benefits of this surgery are seen within days of the surgery. The results can last a long time. Your child will keep taking seizure medicines to get the best seizure control. For a small amount of patients, seizures may slowly get worse again over time. This may happen months to years after surgery. The reason for this is not known. Most patients have long term improvement.

Please call the epilepsy surgery coordinator with any questions or concerns you have about the epilepsy surgery process at Children's Hospital of Wisconsin.

This teaching sheet is meant to help you care for your child. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment, and follow-up.

ALERT: Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child has special health care needs that were not covered by this information.

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