

# Temporal encephalocele: a novel indication for magnetic resonance-guided laser interstitial thermal therapy for medically intractable epilepsy

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# A clinical scenario and conventional approaches

- Intractable temporal lobe epilepsy
- Imaging: temporal encephalocele
  - Temporal encephalocele (TE) is an abnormal herniation of brain parenchyma through osseous-dural defects of the middle temporal fossa/skull base floor.
  - TE can present with pharmacoresistant epilepsy, specifically anteroinferior TE.
- Conventional treatment options:
  - Standard temporal lobectomy and amygdalohippocampectomy
  - Temporal lobectomy sparing the amygdala and hippocampus
  - Limited resection/lesionectomy/disconnection

# Imaging: temporal Encephalocele (TE)

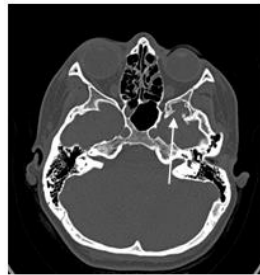


Fig: 1A



Fig: 1B

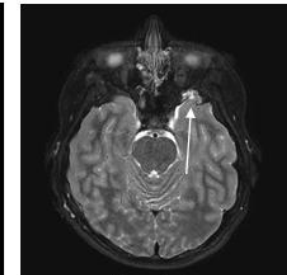


Fig: 1C

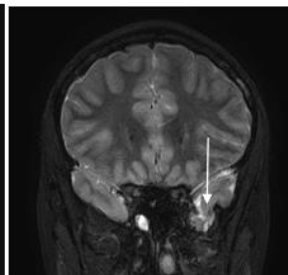


Fig: 1D

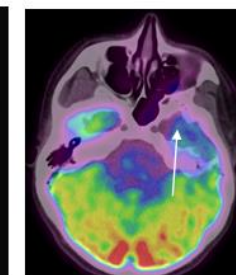


Fig: 1E

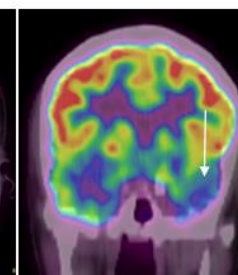


Fig: 1F

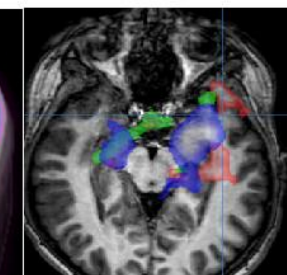


Fig: 1G

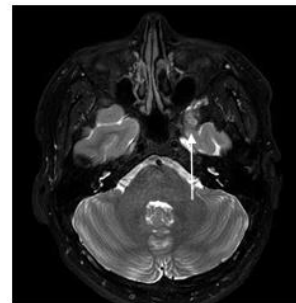


Fig: 1H

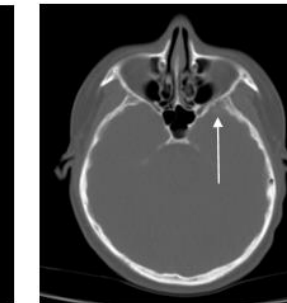


Fig: 1I

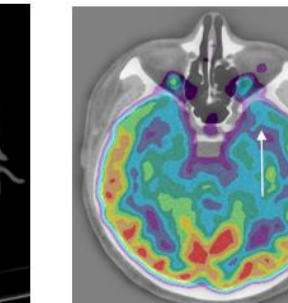


Fig: 1J

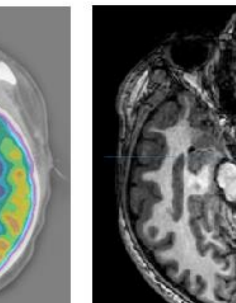


Fig: 1K

# MRgLITT: A novel and minimally invasive approach

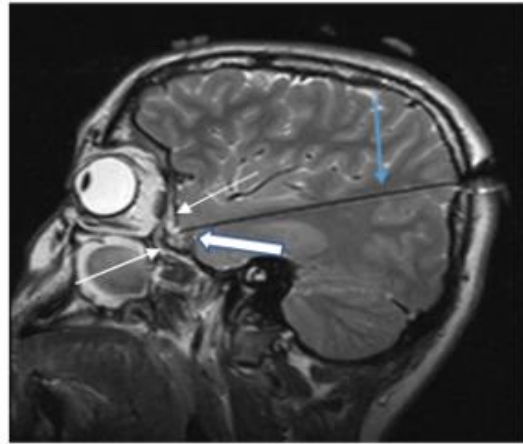


Fig: 2A

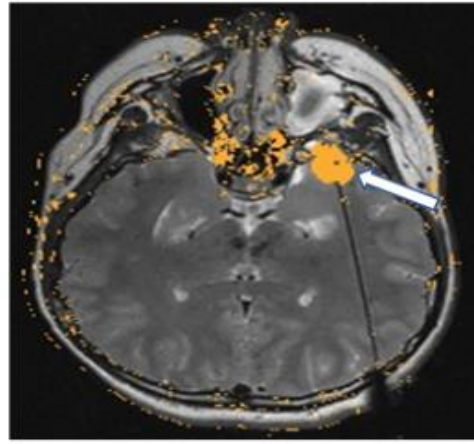


Fig: 2B

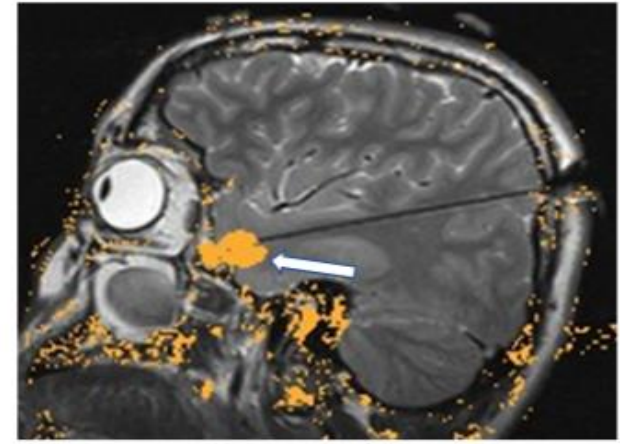


Fig: 2C

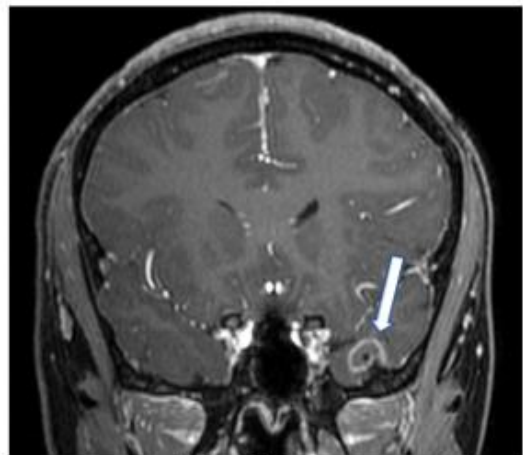


Fig: 2D

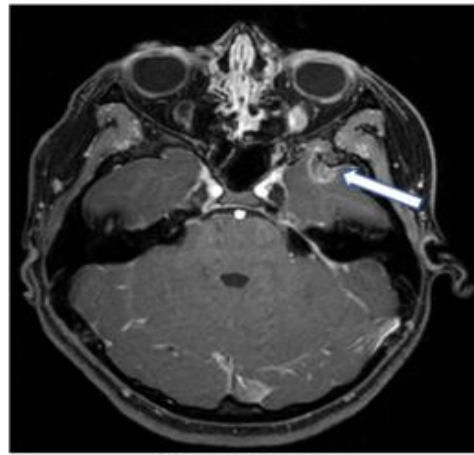


Fig: 2E

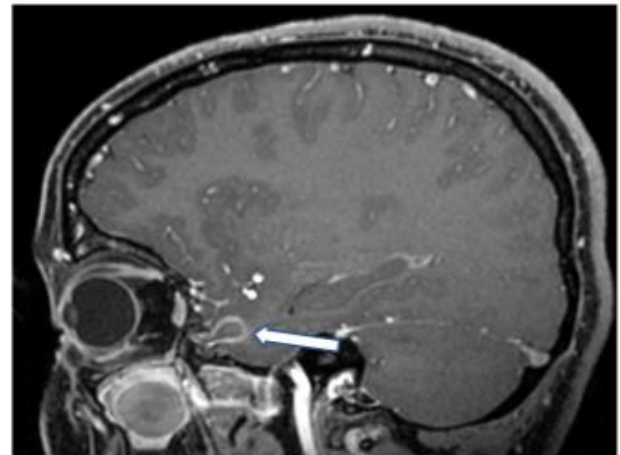


Fig: 2F

# MRgLITT for temporal encephalocele (TE)

- Background
  - Seizure outcome is excellent and/or the same, whether limited to local resection/disconnection or lobectomy for TE.
  - Disconnection can be achieved without open surgery through Magnetic Resonance-guided Laser Interstitial Thermal Therapy (MRgLITT).
  - When treating with surgery, one should consider the more limited approach with the least amount of morbidity without compromising surgical outcome.
- Experience
  - Two pediatric patients with intractable temporal lobe epilepsy treated with MRgLITT were seizure-free at the last follow-up visit (up to 18 months).
  - The present study demonstrates the technique and feasibility of MRgLITT for TE.
- Conclusion
  - Local disconnection and limited cortical ablation can be achieved safely and effectively with a novel and minimally invasive approach based on MRgLITT.
  - MRgLITT should be considered as a primary surgical option for patients with intractable epilepsy secondary to TE.