

Review of: "Surgical treatment of Temporal Lobe Epilepsy: comparative results of selective amygdalohippocampectomy versus anterior temporal lobectomy from a referral center in Brazil"

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This is an interesting article comparing the results of two surgical techniques (Anterior Temporal Lobectomy and Selective AmygdaloHippocampectomy) in terms of seizure control in patients suffering from temporal lobe epilepsy considering the affected side. The sample size is appropriate. The statistical analysis is clear and sufficient to substantiate the findings. Taken into account that the cost limitation for supporting the choice of a surgical procedure could be questionable in scientific terms, it can be reasonable in the real-world health system. Since the aim of the study the results and the conclusions have been sufficiently demonstrated and they can be accepted regarding the higher rate of satisfactory seizure control of the ATL procedure when compared to patients undergoing SAH. The authors did not perform a neuropsychological assessment providing the motivation that all surgeries in the left hemisphere were SAH. This may be reasonable with respect to speech and language. Nonetheless, a comprehensive neuropsychological assessment, including social cognition, executive functions, and memory at least, could be needed considering that the preservation of these functions affects the outcome as well as the seizure control.