

## **Neuropsychological Assessments for Epilepsy Surgery during COVID-19 Restrictions**

Many countries have now placed significant restrictions on the movements of patients and clinicians during the Covid-19 pandemic. In response, neuropsychologists have begun to adapt to new ways of working with an increase in the use of tele-consultations and tele-neuropsychological evaluations (TeleNP) for some patient groups. There are a number of standardised instruments available for remote assessments and the International Neuropsychological Society is an excellent resource for clinicians who need to explore this option for their patients. (See <https://www.the-ins.org/>). However, there are limitations in our ability to perform a comprehensive neuropsychological assessment for epilepsy surgery candidates via telehealth and the validity of such assessments for that purpose has not been established.

The ILAE Neuropsychology Task Force has recently published guidelines for the role of neuropsychologists in the pre- and post-surgical evaluation of epilepsy surgery patients (1). Epilepsy surgery is an elective procedure. The preoperative neuropsychological assessment is an integral part of the presurgical evaluation and is a highly specialised investigation which provides critical information for decision making both within the team and for the individual considering surgery. It is important that the pre-surgical evaluation is comprehensive and valid and not based on simplified screening measures. The ILAE Neuropsychology Task Force do not recommend that any surgical candidates proceed to surgery without a comprehensive neuropsychological work up, in exactly the same way that epilepsy surgery would not be recommended for someone with incomplete neurophysiological or neuroradiological data.

Making a decision to undergo elective surgery for the management of epilepsy will be a very significant one for the individual concerned and their family. Decisions such as this cannot be made without careful thought and consideration and certainly not in isolation. The Covid 19 Pandemic and its worldwide implications for health services and health services resources may not be the best environment for making such life changing decisions. Whilst compromise and new ways of working are necessary for urgent neurosurgical procedures, epilepsy surgery should not be conducted as an emergency procedure.

1. Baxendale S, Wilson SJ, Baker GA, Barr W, Helmstaedter C, Hermann BP, et al. [Indications and expectations for neuropsychological assessment in epilepsy surgery in children and adults](#). *Epileptic Disord* 2019 Dec 25];21(3):221–34.