What do doctors consider when suggesting a neurotechnology treatment for drug resistant epilepsy?

Understanding why physicians suggest a particular treatment supports trust and communication with patients and families.

**ABOUT THIS STUDY**
Opinions gathered from 33 Canadian and American pediatric neurologists and neurosurgeons.

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**CLINICAL FACTORS**

- **EVIDENCE**
  Scientific evidence answers three big questions.

- **EFFECTIVENESS**
  Does the intervention reduce seizure number?

- **SAFETY**
  Are there risks to brain development?

- **MECHANISMS**
  How does the intervention work?

- **PERSONAL**
  - Preferences
  - Lifestyle and values
  - Individual needs

- **MEDICAL**
  - Type of epilepsy
  - Child’s development
  - Other health conditions

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**PATIENT CANDIDACY**
The right treatment combines the medical and personal needs of the patient.

**ETHICAL FACTORS**

- **ACCESS**
  - Where is the treatment available?
  - Could other treatments be used sooner?
  - How long are wait times?
  - Do patients need to travel far?

- **COST**
  - Can the hospital afford the treatment?
  - What is the cost to patients?
  - Will insurance cover treatment?
  - Will appointments interrupt work?

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**TAKE-HOME MESSAGES**

- Physicians rely on the highest standards for scientific evidence for new neurotechnology.
- Patients’ personal and medical factors taken together impact which treatments physicians consider.
- High costs related to neurotechnology may limit treatment.
- Factors affecting access to neurotechnology are country-dependent.

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**Ongoing seizures carry serious risks like sudden unexpected death in epilepsy (SUDEP).**

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**SOURCE:**

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**Specific concerns vary between Canadian and American healthcare systems.**