



Self-Limited Epilepsy with Centrotemporal Spikes (Benign Rolandic Epilepsy)

What Is Self-Limited Epilepsy with Centrotemporal Spikes?

Patients with self-limited epilepsy with centrotemporal spikes have focal seizures that involve twitching, numbness or tingling of the face or tongue. Sometimes, a focal seizure can develop into a bilateral tonic-clonic seizure in which the whole-body jerks with forceful movements.

Seizures typically happen in the early morning or just before bedtime, but they also can happen during sleep. Patients almost always stop having these seizures by the time they reach their teen years.

What Causes Self-Limited Epilepsy with Centrotemporal Spikes?

Doctors don't know what causes self-limited epilepsy with centrotemporal spikes. Some kids may have a relative who also has epilepsy. Recently, several gene mutations were discovered in such families.

How Is Self-Limited Epilepsy with Centrotemporal Spikes Diagnosed?

Doctors diagnose the condition based on the description of the seizures, their timing, the child's age and development, and results from an EEG.

Kids who've had a seizure might need to see a pediatric neurologist (a doctor who treats brain, spine, and nervous system problems). Other tests done can include:

- VEEG, or video electroencephalography (EEG with video recording)
- MRI scans to get very detailed images of the brain

How Is Self-Limited Epilepsy with Centrotemporal Spikes Treated?

Not all children with self-limited epilepsy with centrotemporal spikes need treatment. Those who have recurrent seizures generally need to take medicine to control the seizures.

Many pediatric neurologists use a low-dose antiseizure medication. If a child hasn't had a seizure in more than 2 years, the neurologist will do an EEG to see when and if the child can stop taking the medicine. Most children outgrow self-limited epilepsy with centrotemporal spikes around the teen years.

How Can Parents Help?

If your child takes medicine, make sure you give it exactly as directed. You can also help your child avoid known seizure triggers such as lack of sleep.

Some children have learning or behavior problems, even if the seizures are well-controlled. Getting help from specialists early on will support your child's academic and emotional success.

No special care is needed during a typical self-limited epilepsy with centrotemporal spikes seizure. But because it could lead to a tonic-clonic seizure, make sure that you and other adults and caregivers (family members, babysitters, teachers, coaches, etc.) know what to do if one happens. Your doctor may prescribe an emergency medicine to give if your child has a long seizure or many seizures in a short amount of time. Be sure to ask your doctor about a seizure rescue plan for your child.

What Else Should I Know?

If your child has epilepsy, reassure them that they're not alone. Your doctor and the care team can answer questions and offer support. They also might be able to recommend a local support group. Online organizations can help too, such as:

- [Epilepsy Foundation](#)
- [CDC – Managing Epilepsy](#)