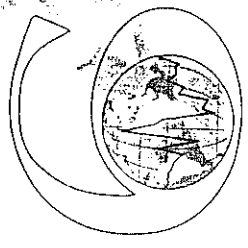


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GIGANT SOMATOSENSORY EVOKED POTENTIALS IN DIFFERENT CLINICAL CONDITIONS:
SCALP TOPOGRAPHY AND DIPOLE SOURCE ANALYSIS

Ragazzoni A,¹ Ferri R,² Di Russo F,³ Del Gracco S,² Barcaro U⁴ and Navona C⁴
Di Russo *Del Gracco* *Barcaro* *Navona*

¹Department of Neurological and Psychiatric Sciences, University of Florence;
²IRCCS "Oasi", Troina (En); ³IRCCS "S. Lucia", Rome; ⁴I.E.I., C.N.R. Pisa, Italy

Scalp topography and equivalent dipoles (EDs) of giant SEPs to median nerve stimulation were investigated in 14 patients: 6 with cortical myoclonus; 3 with unilateral porencephalic lesions; 3 with benign childhood epilepsy with centrotemporal spikes (BCECS); and 2 with Down's syndrome. Spherical spline maps of amplitudes and current source densities were computed for different SEP peaks recorded from 20 scalp electrodes. Dipolar sources were modelled by means of a spatio-temporal analysis (BESA). Five sets of early cortical components contralateral to the stimulated limb were identified in topographic maps of normal subjects: a parieto-frontal N20-P20 complex; a central positivity, P22; a parieto-frontal P27-N30 complex; a central negativity, N33; and a central-parietal positivity, P45. The first four components were optimally explained by two EDs: one tangential, modelling both the N20-P20 and the P27-N30 complexes, was located close to the posterior bank of the central sulcus; a radially oriented dipole, explaining the P22 and N33 peaks, was situated in peri-rolandic cortex (crown of pre/postcentral gyrus).

In all patients except those with BCECS, these early cortical SEP components were identified: depending on the patient, either tangential or radial components alone, or both components, were enhanced. EDs were more easily distinguishable as compared with normal SEPs and the radial dipole was located anterior to the central sulcus, in the crown of precentral gyrus. The two patients with BCECS showed an extreme enhancement of component N60, with a temporal-frontal field explained by a tangential dipole, never observed in normal subjects. It appears that giant SEPs originate mainly from the same cortical sources as normal SEPs.

THE LATENCY OF SOMATOSENSORY EVOKED POTENTIALS IN DIFFERENT CLINICAL CONDITIONS:
SCALP TOPOGRAPHY AND DIPOLE SOURCE ANALYSIS

Ragazzoni A,¹ Ferri R,² Di Russo F,³ Del Gracco S,² Barcaro U⁴ and Navona C⁴

¹Institute for Clinical Neurophysiology Service, Department of Neurology

The peak latency of the somatosensory evoked 800 μm displacement was calculated to be 3.5ms were subtracted for the receptor delay between 800 μm and 25 μm displacements are used by the mechanisms of the temporal summation system is about 9ms under the conditions of The stimulus time course was the same for indentation phase of the skin was always 1 intensities of the stimulus. It seems, therefore on the duration of the afferent discharge, but shorter the summation time. This results peripheral stimulus, producing a long lasting