

## Epileptic seizures characterized with “irresistible will to talk”: a case report

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*When epileptic discharges reach the centers connected with speech, this condition generally results in various speech disorders or speech arrest (epileptic aphasia). Activation of speech function due to arrival of epileptic discharges to speech related areas has not been reported by now. A 20 year-old male patient who has epileptic seizures of various clinical features for five years which characterized with “irresistible will to talk” at times is presented. [Journal of Turgut Özal Medical Center 1(4):306-307,1994]*

*Key Words: Epilepsy, speech*

### **Karşı konulmaz bir konuşma isteğiyle şekillenen epilepsi nöbeti : vaka sunumu**

*Konuşmayla ilgili merkezlere ulaşan epileptik deşarjlar genellikle çeşitli konuşma bozukluklarına veya konuşmanın durmasına (epileptik afazi) yol açar. Epileptik deşarjlara bağılı olarak konuşma fonksiyonunun artması şimdiye kadar rapor edilmemiştir. Bu makalede, 5 yıldır çeşitli epileptik bulguları ve zaman zaman karşı konulmaz bir konuşma isteği olan, 20 yaşında bir erkek hasta sunuldu. [Turgut Özal Tıp Merkezi Dergisi 1(4):306-307,1994]*

*Anahtar Kelimeler: Epilepsi, konuşma*

When epileptic discharges reach the centers connected with speech, this generally results in various speech disorders or speech arrest (epileptic aphasia)<sup>1</sup>. Activation of speech function due to arrival of epileptic discharges to speech related areas has not been reported by now. A case who has these properties was presented, and the subject was discussed.

### **CASE REPORT**

A-20 year-old male patient applied to our clinic. According to information received from the patient and his relatives; there had been seizures with different clinical pictures which recurred quarterly. He was normal during the seizure-free periods. Three different seizure types were defined. First type seizure: It lasts 3-4 minutes with intact consciousness, and is characterized with hemifacial convulsions and speech arrest. Second type seizure: It lasts 4-5 minutes with deterioration of consciousness, and is characterized with absurd laughings, talkings and movements (complex partial seizure). Third type seizure: It lasts 3-4 minutes with intact consciousness, is characterized with “irresistible will

to talk”. During this seizure, he had been trying to suppress the seizure by reading anything. He had had head trauma while he was three months old. Neurological and other systemic examinations were found to be normal. Interictal EEG showed neuronal hyperexcitability characterized with sharp waves at the bitemporal regions. Cranial CT was found normal. All the seizures ceased after beginning of carbamazepine 800 mg / day.

### **DISCUSSION**

When epileptic discharges reach the centers connected with speech, this generally results in speech disorders or speech arrest (epileptic aphasia)<sup>1,2</sup>. It is thought that speech disorder or epileptic aphasia occurs due to deterioration of the function of the speech related centers by epileptic discharges. First type seizures of our patient were such type seizures. Patients who have complex partial seizures sometimes repeat a certain word or sentence in a stereotypical manner, and sometimes say meaningless words<sup>1,3</sup>. Consciousness generally deteriorates in these seizures. Second type seizures in

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our patient are such seizures.

Seizures characterized with increase at the speech function or "irresistible will to talk" as in our patient have not been reported by now. We think that such seizures occur due to activation of the function of speech related centers by epileptic discharges. The reading function is generally impaired when the speech function is impaired. We conclude that the speech function of our patient is intact during these seizures as he tries to suppress the seizure by reading anything. Stopping of the speech function during epileptic seizures refers to as "epileptic aphasia". We think that the term "epileptic hyperphasia" can be used to determine activation of the speech function seen at our patient's seizures. It is difficult to explain why epileptic aphasia during certain seizures and epileptic hyperphasia during other seizures occur in the same patient.

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