

## Script – Broadcast - High Def Diagnosis

Ask anyone living in a non-urban area and they'll tell you getting in to see a specialist can sometimes be difficult.

That's why OSF HealthCare has developed an extensive tele-health diagnostic program - that address several medical conditions - across all of our service areas. Tele-epilepsy being just one.

Epilepsy is the fourth most common neurological disorder in the United States after migraine, stroke, and Alzheimer's disease. About one percent of Americans have some form of epilepsy, and nearly four percent will develop epilepsy at some point in their lives.

The challenge is knowing if you have it. People could have epileptic episodes for years and still not be aware because seizures come in all shapes and sizes.

### **SOT: Dr. Tariq Gheith, Epileptologist with OSF Illinois Neurological Institute**

"Seizures can be a subtle as you smelling something or you feeling like somebody is in your house. Those kind of feelings alone can be a seizure. So, that's my job, to kind of suss out from you what's been going on and, kind of, go into depth. And that why it's very important to get in to see somebody like me." (:19)

The tele-health programs - like tele-epilepsy - serve primarily patients in rural communities who may not have access to a medical specialist - like an epileptologist.

Via a high-definition remote feed, Dr. Gheith can meet with any patient visiting a local OSF clinic or medical center. A nurse is in the room with the patient to assist with the examination and, more importantly, documentation of the patient's history. This determines if the episodes the patient may be experiencing are epileptic or non-epileptic.

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"The average non-epileptic takes about seven to eight years before they're diagnosed. And they go down the rabbit hole of the other side, of multiple medicines, seizure medicines that never work. And so, it's very important for patients who lose consciousness, for any reason, to get in to see an epileptologist first." (:18)

Dr. Gheith says the assessment is very much similar to actually seeing the patient in-person and can determine possible next steps, like additional diagnostic tests.

He defines epilepsy as having more than two seizures in a lifetime. So it's important for a patient to seriously discuss suspected episodes with their primary care physician and err on the side of caution in seeking a referral to a specialist.

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"If they're on the fence, for any reason, or if anybody passes out, for any reason, or has weird feelings - there are episodes of lost times - they absolutely have to see me at least once. And then we decide if they need to follow up with us, or not." (:12)

While he admits a diagnosis of epilepsy can be concerning, Dr. Gheith says at least half of all patients can be treated on one medicine alone.

In addition to Tele-epilepsy, OSF HealthCare offers Tele-peds, Tele-neurology, Tele-sleep, Tele-dementia and Tele-psychiatry. Learn more at [www.osfhealthcare.org/services/telehealth/](http://www.osfhealthcare.org/services/telehealth/)