COLUMBIA NEUROSURGERY - NEUROLOGICAL INSTITUTE

710 WEST 168TH STREET, 4TH FL

NEW YORK NY 10032-3726

Date: mm/dd/yy

Re: patient name

**MRN: ##**

DOB: mm/dd/yy

Address:

RE: Update for DBS appeal: additional information

To Whom It May Concern:

xxx has been evaluated by the Columbia University Epilepsy Team of neurosurgeons and epileptologist and presented at the epilepsy conference. There was a consensus that she would benefit most from a bilateral thalamic Deep Brain Stimulation (DBS) implant. Please provide an exception for xxx to proceed with DBS treatment.

Our office recently performed a peer to peer discussion for approval for xxx’s upcoming DBS procedure. The MD reviewer denied her procedure because of her age and instructed us to initiate an appeal.

At present, without proceeding with a surgical therapeutic procedure, she is at risk of continued seizures, cognitive decline, and injury/death form her epilepsy. The surgery will be performed by Dr. xxx and is currently scheduled on xxx. The hospital course is brief, and most patients are discharged within a day or two of the procedure with a rapid recovery.

**Very recent literature has demonstrated the efficacy of DBS for pediatric epilepsy patients. The literature citations and articles are attached to this letter. Neurologists and neurosurgeons from the Pediatric Epilepsy Research Consortium summarized literature on thalamic neuromodulation. They concluded that although caution is warranted due to differences between pediatric and adult epilepsy, the efficacy and safety of pediatric neuromodulation appear comparable to that in adults (Samanta et al., 2024). Indeed, thalamic stimulation is increasingly accepted for generalized and diffuse onset epilepsies, with recent completion of one randomized trial. One recent systematic review from 21 studies identified 56 pediatric patients who received thalamic DBS for multifocal and generalized seizures (Sharma et al., 2024). Forty-three out of 56 (76.8 %) patients undergoing thalamic DBS achieved a treatment response of >50 % seizure reduction (Sharma et al., 2024).**

We are asking that the procedure be approved and covered by insurance at the earliest convenience, so that she is able to proceed on xxx. Please feel free to contact my office at xxx for any questions, concerns, or clarifications regarding the procedure.

Sincerely,

Brett Youngerman, MD, MS

Office: 212-305-2530

Fax: 212-305-2026

Department of Neurosurgery

Neurological Institute of New York

Columbia University Medical Center

710 West 168th Street, Floor 4

New York, NY 10032

**Citations:**

Sharma, A., Parfyonov, M., Tiefenbach, J., Hogue, O., Nero, N., Jehi, L., Serletis, D., Bingaman, W., Gupta, A., & Rammo, R. (2024). Predictors of therapeutic response following thalamic neuromodulation for drug-resistant pediatric epilepsy: A systematic review and individual patient data meta-analysis. Epilepsia, 65(3), 542–555. https://doi.org/10.1111/epi.17883

Samanta, D., Aungaroon, G., Albert, G. W., Karakas, C., Joshi, C. N., Singh, R. K., Oluigbo, C., Perry, M. S., Naik, S., Reeders, P. C., Jain, P., Abel, T. J., Pati, S., Shaikhouni, A., & Haneef, Z. (2024). Advancing thalamic neuromodulation in epilepsy: Bridging adult data to pediatric care. Epilepsy research, 205, 107407. Advance online publication. https://doi.org/10.1016/j.eplepsyres.2024.107407