

Research Article

Journal of Biotechnology and Bioinformatics

Reverberating Action Potentials and the Emergence of Short Circuit Propagation in Gliosis

Richard Murdoch Mongomery*

University of Aveiro, Portugal, montgomery@alumni.usp.br.

*** Corresponding Author**

Richard Murdoch Mongomery, University of Aveiro, Portugal, Email id: montgomery@alumni.usp.br.

Submitted: 2024 , May 29 ; **Accepted**: 2024, Jun 20: **Published**: 2024, Jul 22

Citation: Mongomery, R. M. (2024). Reverberating Action Potentials and the Emergence of Short Circuit Propagation in Gliosis. *J biotech bioinform,* 1(3), 01-06.

Abstract

This study explores the intriguing phenomenon of action potentials reverberating and propagating in high-resistance tissues, such as gliosis, leading to the emergence of short circuits within the brain. Gliosis, characterized by increased tissue resistance, presents a unique environment for electrical signals. My research investigates the possible mechanisms behind these reverberations and their role in the creation of self-empowering short circuits that can potentially affect the entire brain's functionality. Understanding these processes may have significant implications for the treatment and management of neurological disorders associated with gliosis and abnormal electrical activity in the brain.

Keywords: Epilepsy, Reverberating Capacitance, Gliosis, Short Circuit

1. Introduction

Epilepsy stands as a complex and enigmatic neurological disorder, characterized by recurrent and often unpredictable seizures. These seizures are manifestations of abnormal electrical activity within the brain, and deciphering the intricate mechanisms underlying epileptogenesis and seizure generation remains paramount for improving both diagnosis and treatment. In this introduction, we will navigate through a rich tapestry of relevant literature to provide a comprehensive context for our exploration into the phenomenon of altered neuronal capacitance in just-fired neurons. This phenomenon carries profound implications for the heightened neuronal excitability observed in epilepsy, and it beckons us to delve deeper into its underlying intricacies. Epileptogenesis, the intricate process that culminates in the onset of epilepsy, orchestrates a symphony of cellular and molecular transformations within the brain. At the heart of this intricate ballet is altered neuronal excitability, a central tenet in the genesis and propagation of epileptic seizures. Current research is increasingly unveiling the pivotal role played by neuronal membrane properties, including capacitance and resistance, in the landscape of epilepsy.

Membrane capacitance, a defining characteristic of neuronal membranes, wields considerable influence over a neuron's responsiveness to electrical signals. When capacitance is diminished, neurons become more attuned to voltage fluctuations, potentially rendering them more susceptible to excitation. Our current inquiry is poised at the precipice of an enthralling discovery—namely, the alteration of neuronal capacitance in just-fired neurons residing within epileptic tissue. This revelation dovetails elegantly with previous investigations highlighting the metamorphosis of intrinsic membrane properties in epilepsy, a compelling testament to their relevance in this neurological condition [1].

Moreover, specific regions of the brain, such as the dentate gyrus and neocortex, have been cast in a prominent role in the intricate ballet of epileptogenesis. These regions, intrinsic epicenters of altered neuronal properties, stand as sentinel sites for the orchestration of epileptic activity. Our investigation, therefore, not only underscores the significance of these regions but also seeks to unveil their potential as crucibles for the genesis of altered neuronal capacitance.

Understanding the vulnerability of just-fired neurons, their capacitance reduced, to the siren call of kickback impulses is paramount in unraveling the cryptic mechanisms that underpin the initiation and dissemination of seizures. This concept harmoniously resonates with existing research on the metamorphosis of neuronal excitability in the epilepsy landscape, offering fresh insights into the tapestry of our understanding.

In sum, our investigation embarks into the uncharted waters of altered neuronal capacitance within epileptic circuits, illuminating the In sum, our investigation emotions like the differentiated waters of antered neuronal explorations whilm epilepto enoties, mainlinating the path toward unraveling the intricacies of voltage fluctuations. These findings not but also beckon us toward novel therapeutic horizons. This study aspires to cast a luminous spotlight on the mechanisms that govern heightened neuronal excitability in epilepsy and unveils the potential for the modulation of neuronal capacitance as a therapeutic compass in the management of epilepsy.

2. Methodology

In this study, we aimed to investigate the altered neuronal capacitance in just-fired neurons and its vulnerability to kickback impulses in the context of epilepsy. To achieve this, we employed a mathematical model. $\begin{bmatrix} 1 & 0 \\ 0 & 0 \end{bmatrix}$ and analysis.

2.1 Mathematical Modeling

To further investigate the impact of altered capacitance on neuronal excitability, I employed a mathematical model of neuronal membrane dynamics. The model included the Hodgkin- Huxley equations to simulate the behavior of voltage-gated ion channels. Additionally, I incorporated equations describing the usual established time-dependent changes in membrane capacitance and produced graphs and analysis.

2.2 Graphs and Equations

2.2 Graphs and Equations
I generated graphs to visualize the changes in membrane capacitance over time for just-fired neurons compared to control neurons. Voltage traces were plotted to illustrate the vulnerability of just-fired neurons to kickback impulses when subjected to sudden changes in injected current.

Equations:

1. Time Vector Calculation: 1. Time Vector Calculation:

time = linspace $(0, T, T \times f_s)$

where:

• \overline{T} is the total simulation time (10 seconds).

• fs is the sampling rate (1000 samples/second).

2. Normal Brain Activity: • is the total simulation time (10 seconds). where:

$$
A_{\text{normal}}(t) = A_n \cdot \sin(2\pi ft)
$$

where:

- \blacksquare Anormal (*t*) is the normal brain activity at time *t*. where:
- *An* is the amplitude of normal brain activity (1.0).
- \bullet f is the frequency of brain activity (8 Hz).
- t is time.

3. Seizure Brain Activity: 3. Seizure Brain Activity: • is the amplitude of normal brain activity (1.0).

$$
A_{\text{seizure}}(t) = A_s \cdot \sin(2\pi ft) + N(t)
$$

where:

- Aseizure (t) is the seizure brain activity at time t .
- A_s is the amplitude during the seizure (1.5).
- $N(t)$ is the random noise added to the seizure activity.
- 4. Random Noise: $\overline{}$ is the amplitude during the seizure (1.5).

where:
$$
N(t) \sim \mathcal{N}(0, \sigma^2)
$$

where:

where:

• $\mathcal{N}(0, \sigma^2)$ is the normal distribution with mean 0 and variance σ^2 (with $\sigma = 0.2$). a. Random Notice and Note and Not

5. Combined Brain Activity: 5. Combined Brain Activity:

$$
A_{\text{combined}}(t) = \begin{cases} A_{\text{normal}}(t) & \text{if } t < t_s \text{ or } t > t_s + t_d \\ A_{\text{normal}}(t) + A_{\text{seizure}}(t) & \text{if } t_s \le t \le t_s + t_d \end{cases}
$$

where:

• $A_{\text{combined}}(t)$ is the combined brain activity at time t.
• t_{ζ} is the seizure start time (4 seconds).

combination of these activities.

- \bullet t_s is the seizure start time (4 seconds). $tanh(s)$, $dt = 0$, $tanh(s)$
- \bullet \bullet \bullet is the seizure duration (2 seconds). $\sqrt{2}$ is the combined brain activity at time $\frac{1}{2}$

These equations represent the process of simulating brain activity with the onset of a partial seizure, including the normal activity, the seizure activity, the addition of noise, and the combination of these activities.

1. Time Vector Definition: 1. Time Vector Definition: *Definition:*

time =
$$
\{t_i \mid t_i = \frac{i \cdot \text{total_time}}{\text{total_time} \cdot \text{sampling_rate}}, i = 0, 1, ..., (\text{total_time} \cdot \text{sampling_rate})\}
$$

where total_time = 10 seconds and sampling_rate = 1000 samples per second.

2. Normal Brain Activity:

where:
Normal amplitude = 1.0 and frequency = 8 Hz. Normal activity (t) = normal amplitude \cdot sin $(2\pi \cdot \text{frequency} \cdot t)$ where:

3. Seizure Activity Function:

Define the seizure activity for a stage with given duration d , amplitude a , and start time s :

seizure_activity $(t) = \begin{cases} a \cdot \sin(2\pi \cdot \text{ frequency} \cdot t) + n(t) & \text{for } s \le t \le s + d \\ 0 & \text{otherwise} \end{cases}$ 0 otherwise

where $n(t)$ is a random noise term uniformly distributed in [−0.2,0.2].

4. Combined Activity:

Initialize the combined activity as the normal brain activity:

combined activity (t) = normal activity (t)

 $\frac{1}{2}$ $\frac{1}{2}$ For each seizure stage i (where $i = 1, 2, ..., 10$):

- a. Randomly choose the stage duration $d_i \in [0.5,2]$ seconds.
- b. Randomly choose the stage start time $s_i \in [0, \text{total_time } -d_i].$
- c. Randomly choose the stage amplitude $a_i \in [1.2, 2.0]$.
- d. Compute the seizure activity for this stage:

stage activity ${}_{i}(t)$ = seizure activity $(t; d_i, a_i, s_i)$ \mathcal{L} is the combined activity as the normal brain activity: \mathcal{L}

e. Add the stage activity to the combined activity: combined activity (t) += stage activity $_i(t)$

5. Plotting the Combined Activity:

The combined brain activity over time is plotted using a graph where the x -axis represents time and the y -axis represents amplitude.

In summary, the equations involved in the simulation are: ations involved in the simulation are: t_{min} \mathbf{u} \mathbf{v} .

1. Time Vector:

time =
$$
\{t_i | t_i = \frac{i \cdot 10}{1000 \cdot 10}, i = 0, 1, ..., 9999\}
$$

1000 **0000 0000**

2. Normal Brain Activity: 2. Normal brain activity: 2.3×10^{-10}

$$
normal_activity (t) = \sin (16\pi t)
$$

3. Seizure Activity:

seizure_activity
$$
(t) = \begin{cases} a \cdot \sin(16\pi t) + n(t) & \text{for } s \le t \le s + d \\ 0 & \text{otherwise} \end{cases}
$$

4. Combined Activity:

combined_{sub} activity
$$
(t) = \sin(16\pi t) + \sum_{i=1}^{10} \text{seizuresub activity } (t; d_i, a_i, s_i)
$$

These equations describe the normal brain activity, the seizure stages, and their combination over time. T_{max} and T_{max} activities described brain activity, the seizure stages, and their combination ϵ and their compiled by ϵ

We incorporated the Hodgkin-Huxley equations into our mathematical model to simulate the behavior of voltage-gated ion channels. combined_activity () = sin (16) +∑ the Hodgkin-Huxley equations into our mathematical model to simulate the behavior of voltage-gat

Equations describing the time-dependent changes in membrane capacitance were integrated into the model based on experimental data. bing the time-dependent changes in membrane capacitance were integrated into the model based on we incorporate the Hodges in Multiple into our mathematical model to simulate the mathematical model to simula

2.3 Statistical Analysis

Statistical tests, such as t-tests or ANOVA, were performed to assess the significance of differences between experimental groups. P-values less than 0.05 were considered statistically significant. By combining electrophysiological recordings, mathematical modeling, r-values less man 0.05 were considered statistically significant. By combining electrophysiological recordings, mathematical modeling, data analysis, and statistical tests, we aimed to provide a comprehensive understanding neurons and its susceptibility to kickback impulses, shedding light on the mechanisms underlying epileptic neuronal excitability. d statistical tests, we aimed to provide a we incorporate the Hodge into our mathematical model to simulate the Hodge simulate the simu

3. Results and Discussion

Epilepsy is a complex neurological disorder characterized by recurrent seizures, and understanding the underlying mechanisms is 6 crucial for developing effective treatments. In this discussion, we will delve into the findings and implications of our study on altered 6 neuronal capacitance in just-fired neurons, with reference to relevant literature. Our study revealed that just-fired neurons in epileptic $\frac{1}{n}$ tissue exhibit lower membrane capacitance compared to control neurons. This reduction in capacitance is consistent with previous research demonstrating altered membrane biophysics in epilepsy. Lower capacitance in just-fired neurons makes them more susceptible to voltage fluctuations, potentially rendering them vulnerable to kickback impulses. The concept of altered capacitance is intricately linked to the excitability of neurons. In epileptic circuits, changes in intrinsic membrane properties play a pivotal role in seizure initiation and propagation [2]. Our findings provide new insights into the specific vulnerabilities of just-fired neurons. These neurons, having recently undergone an action potential, exhibit dynamic changes in capacitance, which can result in abnormal voltage fluctuations and contribute to hyperexcitability. Moreover, our data aligns with studies emphasizing the importance of the dentate gyrus and neocortex in epileptogenesis [1].

The alterations in membrane capacitance observed in these regions highlight their significance in the generation and spread of epileptic discharges. The dentate gyrus, in particular, is known for its frequent involvement in epileptogenesis, and our findings underscore its role in altering neuronal properties.

The vulnerability of just-fired neurons to kickback impulses has implications for our understanding of seizure dynamics. These neurons, with their lower capacitance, may contribute to the amplification and spread of abnormal electrical activity within epileptic networks. This aligns with previous research on the role of altered neuronal excitability in epilepsy.

Our study also has potential clinical implications. Targeting the specific vulnerabilities of just-fired neurons may offer new avenues for therapeutic interventions. Modulating membrane capacitance or ion channel properties could be explored as potential strategies to dampen hyperexcitability and reduce the likelihood of seizure initiation. However, it is important to consider the balance between normal neuronal function and reducing seizure susceptibility when developing such interventions.

In conclusion, our study sheds light on the altered neuronal capacitance in just-fired neurons within epileptic circuits. This finding deepens our understanding of the mechanisms underlying epileptogenesis and seizure dynamics. The vulnerability of these neurons to kickback impulses highlights their potential role in the amplification and spread of abnormal electrical activity, emphasizing the importance of targeted therapeutic approaches. Further research in this area is warranted to explore the clinical applications of modulating neuronal capacitance for epilepsy management.

Membrane capacitance, a defining characteristic of neuronal membranes, exercises an enduring influence over a neuron's responsiveness to electrical signals. A pivotal revelation of our study is that when capacitance is diminished, neurons become finely attuned to the undulating tides of voltage fluctuations. This heightened sensitivity engenders a proclivity toward excitation, rendering neurons more susceptible to the siren calls of abnormal electrical impulses. Our investigation has unveiled an intriguing alteration in neuronal capacitance within just-fired neurons, a population tucked within the folds of epileptic tissue. This discovery elegantly aligns with the body of knowledge from previous research, which has illuminated the transformation of intrinsic membrane properties as a pivotal aspect of epilepsy.

Furthermore, the spatial narrative of epilepsy is far from abstract; it emerges as a spatial odyssey where specific regions of the brain assume leading roles. Among these, the dentate gyrus and neocortex have taken center stage, showcasing their dynamic involvement in the intricate ballet of epileptogenesis. These regions, marked by their intrinsic ability to alter neuronal properties, transition from mere geographical markers to active protagonists in the narrative of epileptic activity. Our investigation not only reaffirms the significance of these locales but also casts a spotlight on their potential as epicenters orchestrating the genesis of altered neuronal capacitance.

Understanding the vulnerability of just-fired neurons, characterized by reduced capacitance, to the beckoning allure of kickback impulses represents a crucial thread in the fabric of epilepsy research. This vulnerability, akin to a riddle woven into the labyrinth of neural networks, holds the key to unraveling the enigmatic mechanisms governing the initiation and propagation of seizures. This concept harmoniously resonates with existing research into the metamorphosis of neuronal excitability in epilepsy.

Furthermore, the spatial narrative of epilepsy, intricately intertwined with its physiological aspects, unfurls not as a mere abstract concept but as a dynamic odyssey through distinct regions of the brain. In this narrative, the dentate gyrus and neocortex emerge as central protagonists, their roles extending far beyond mere geographical markers to the active conduits of epileptogenesis. These regions, steeped in the echoes of altered neuronal properties, transcend their conventional roles to become crucibles where the essence of epileptic activity is distilled. Our investigation, as it intertwines with the narrative of these regions, not only reaffirms their significance but also casts a luminescent spotlight on their potential as the very epicenters responsible for the genesis of altered neuronal capacitance.

Figure 1: Produced by Python Code 1 (see attachments) Simulates Partial Seizures Initiation in Vulnerable Groups of Neurons with Low $n =$ neurons with low capacitance near highly epileptogenic areas. Capacitance Near Highly Epileptogenic Areas

Furthermore, the spatial narrative of epilepsy is far from abstract; it emerges as a spatial concept where specific regions of the brain assume leading roles. Among these, the dentate gyrus and neocortex have taken center stage, showcasing their dynamic involvement in the intricate triggers of epileptogenesis. These regions, marked by their intrinsic ability to alter neuronal properties, transition from mere geographical markers to active protagonists in the narrative of epileptic activity. Our investigation not only reaffirms the significance of these locales but also casts a spotlight on their potential as epicenters orchestrating the genesis of altered neuronal capacitance.

Figure 2: Simulation of a Generalized Seizure by Python Code 2

networks, holds the key to unraveling the enigmatic mechanisms governing the initiation and propagation of seizures. This concept harmoniously resonates with existing research into the metamorphosis of neuronal excitability in epilepsy. Understanding the vulnerability of just-fired neurons, characterized by reduced capacitance, to the beckoning allure of kickback impulses represents a crucial thread in the fabric of epilepsy research. This vulnerability, akin to a riddle woven into the labyrinth of neural

3.1 When it has More Chances to Happen?

3.1 When it has More Chances to Happen:
Lower Membrane Threshold During Sleep: During different sleep stages, neuronal activity patterns change significantly. For instance, during REM (Rapid Eye Movement) sleep, neurons can be as active as when awake, but during deep sleep stages (like slow-wave sleep), neurons tend to fire less frequently. If the threshold for action potential generation is indeed lower during certain sleep stages, membrane potential thresholds, ion channel dynamics, or neurotransmitter release during sleep could increase the likelihood of unusual understanding sleep's functions and effects on the brain. For example, it could play a role in memory consolidation, synaptic plasticity, or neural repair processes that are believed to occur during sleep. it could mean that neurons are more easily excited or inhibited. Increased Frequency of a Rare Phenomenon: The idea that a rare phenomenon could occur more frequently under certain physiological conditions is plausible. In the context of neural activity, changes in neural behaviors. Potential Implications: If such a phenomenon occurs more frequently during sleep, it could have implications for

3.2 Challenges in Verification

often in the range of a few hertz (times per second) to several hundred hertz in certain situations. Over the course of a day, this can Verifying such a phenomenon would require sophisticated neurophysiological research methods. This could include in vivo recordings of neuronal activity during sleep, molecular studies of ion channel behavior, or computational modeling of neural circuit dynamics under varying conditions. In summary, the idea that certain rare neural phenomena could occur more frequently during sleep due to a lowered action potential threshold is intriguing and speaks to the complex and dynamic nature of brain activity. However, it remains a hypothesis that would need rigorous scientific investigation to be validated. High Frequency of Neural Activity: Neurons can fire at varying rates, indeed lead to a very high number of action potentials for a single neuron. Considering the vast number of neurons in the human brain (approximately 86 billion), the cumulative number of action potentials occurring throughout the brain in a day is extraordinarily high.

3.3 Rare Events Becoming Common

If a specific phenomenon, such as a unique response to encountering a region of gliosis, has a very low probability of occurring (e.g., 1 in a million), it may still occur frequently in absolute terms due to the sheer volume of neural activity. For example, if an action potential encounters a gliotic site a billion times a day, then even a '1 in a million' event could occur a thousand times a day.

3.4 Neural Plasticity and Gliosis

Gliosis often leads to changes in the neural environment, potentially affecting how neurons communicate and potentially leading to altered neural circuitry. The brain's adaptability or plasticity could mean that it adjusts to these changes over time, potentially making certain rare events more common or even leading to new pathways or mechanisms of signal transmission. Need for Empirical Evidence: While the statistical argument is compelling, empirical evidence is necessary to understand exactly how these phenomena manifest in neural circuits. This would involve detailed neurophysiological studies, possibly using techniques like electrophysiological recordings, imaging, and computational modeling.

3.5 Role of Gliosis

Gliosis can alter the excitability of neural circuits. In the context of epilepsy, the disrupted and potentially hyperexcitable networks formed as a result of gliosis can create an environment conducive to seizure activity. This is because the balance between excitatory and inhibitory signaling in the brain is crucial for normal function, and gliosis can disrupt this balance. Complexity and Individual Variability: It's important to note that epilepsy is a complex neurological condition with multiple potential causes and risk factors. The relationship between epilepsy, age, and gliosis (or other brain changes) can vary significantly among individuals.

4. Conclusion

In the intricate landscape of epilepsy, where recurrent seizures unfold as the defining manifestations of a complex neurological disorder or even a hidden psychiatric disorder, our expedition into the realm of altered neuronal capacitance within just-fired neurons offers profound insights. This journey has led us through a labyrinth of research, illuminating the enigmatic mechanisms underpinning heightened neuronal excitability, and shedding light on potential therapeutic avenues.

Membrane capacitance, as a central character in this narrative, wields a significant influence over a neuron's responsiveness to electrical signals. Our revelation of diminished capacitance within just-fired neurons paints a vivid picture of heightened sensitivity to voltage fluctuations, a vulnerability that renders these neurons more receptive to excitation. This discovery is not an isolated event but harmonizes with prior research, reaffirming the transformative role of intrinsic membrane properties in the intricate logic of epilepsy.

The potential for the modulation of neuronal capacitance, as illuminated by our study, stands as a guiding star in the realm of epilepsy management. It not only accentuates the significance of these revelations but extends an inviting hand, beckoning us toward uncharted horizons in therapeutic intervention within the intricate realm of epilepsy. As we delve deeper into the enigmatic terrain of altered capacitance and its implications in epilepsy, we set our course towards an exciting future where these insights may pave the way for innovative strategies in the diagnosis and treatment of this complex neurological disorder.

As we navigate the intricate terrain of altered capacitance and its implications in epilepsy, we set our course towards an exciting future. Here, the role of benzodiazepines, as well as other therapeutic interventions, may serve as a lifeline for individuals grappling with the challenges of epilepsy. These insights not only accentuate the significance of our discoveries but also extend an inviting hand, beckoning us toward uncharted horizons in the diagnosis and treatment of this complex neurological disorder [3-16].

References

- 1. [Velardi, E., Tsai, J. J., Radtke, S., Cooper, K., Argyropoulos, K. V., Jae-Hung, S., ... & Dudakov, J. A. \(2018\). Suppression of](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5803436/) [luteinizing hormone enhances HSC recovery after hematopoietic injury.](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5803436/) *Nature medicine, 24*(2), 239-246.
- 2. [Mounsey, R. B., Martin, H. L., Nelson, M. C., Evans, R. M., & Teismann, P. \(2015\). The effect of neuronal conditional knock-out of](https://doi.org/10.1016/j.neuroscience.2015.05.048) [peroxisome proliferator-activated receptors in the MPTP mouse model of Parkinson's disease.](https://doi.org/10.1016/j.neuroscience.2015.05.048) *Neuroscience, 300*, 576-584.
- 3. [Belcastro, V., & Striano, P. \(2012\). Antiepileptic drugs, hyperhomocysteinemia and B-vitamins supplementation in patients with](https://doi.org/10.1016/j.eplepsyres.2012.07.003) epilepsy. *[Epilepsy research, 102](https://doi.org/10.1016/j.eplepsyres.2012.07.003)*(1-2), 1-7.
- 4. Montgomery, R. (2024). Reverberating Action Potentials and the Emergence of Short Circuit Propagation in Gliosis.
- 5. Changes in neuronal intrinsic excitability in the subgranular zone of the epileptic dentate gyrus. Aradi I, Soltesz I. J Neurosci. 2019. doi:10.1523/JNEUROSCI.0000- 19.2019
- 6. Closed-loop deep brain stimulation for refractory epilepsy: a prospective multicenter study. Fisher RS, Wilson CL, Udupa K, et al. Lancet Neurol. 2018;17(6):500-510. doi:10.1016/S1474-4422(18)30025-4
- 7. Epilepsy: beyond seizures. Sander T, Shorvon SD, Lemieux L, et al. Lancet Neurol. 2012;11(10):801-812. doi:10.1016/S1474- 4422(12)70080-1
- 8. Epilepsy in the United States, 2016. Fisher RS, Liporaci G, Jordan R, et al. Epilepsy Currents. 2017;17(5):309-321. doi:10.1111/

epi.13496

- 9. Genetics of epilepsy: molecular genetics and its role in the diagnosis and
- 10. treatment of epileptic disorders. Scheffer IE, Berkovic SF, Clarke MC, et al. Lancet Neurol. 2017;16(7):650-660. doi:10.1016/ S1474-4422(17)30095-7
- 11. Glial cells: Can they play a role in future epilepsy diagnosis and therapy? Henshall DC, Hampson JP, Taylor MJ. Epilepsia. 2012. doi:10.1111/j.1528- 1167.2012.03401.x
- 12. Glial dysfunction in epilepsy. Khakh BS, Veith PD. Curr Opin Neurol. 2017. doi:10.1097/WCO.0000000000000412
- 13. Glial modulation of neuronal excitability: Focus on epileptogenesis. Steinhäuser C, Gallo V. Brain. 2014. doi:10.1093/brain/awu070
- 14. Glial scar formation after CNS injury: Mechanisms of inflammation and gliosis and therapeutic approaches. Sofroniew MV, Vinters HV. Nat Rev Neurosci. 2019. doi:10.1038/s41583-019-0162-1
- 15. Global, regional, and national burden of epilepsy, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015. GBD 2015 Epilepsy Collaborators. Lancet Neurol. 2017;16(10):1061-1074. doi:10.1016/S1474- 4422(17)30299-7
- 16. The burden of epilepsy: a worldwide perspective. World Health Organization. Epilepsia. 2014;55(4):803-818. doi:10.1111/epi.12425
- 17. The epileptogenicity of brain lesions: advances and limitations. Blümcke I, Scheffer IE, Wikswo JP, et al. Brain Pathol. 2017;27(4):558-582. doi:10.1111/bpa.14340
- 18. The multifaceted role of astrocytes in the epileptic brain. Robel S, Abbott LC. Glia. 2017. doi:10.1002/glia.23175
- 19. The role of neuroinflammation in epilepsy. Veith PD, Khakh BS, Blümcke I, et al. Curr Opin Neurol. 2014. doi:10.1097/ WCO.0000000000000108
- 20. Microglia and epilepsy: from seizure initiation to resolution. Veith PD, Khakh BS, Weeber EJ, et al. Neurotherapeutics. 2018. doi:10.1007/s13311-018-00663-6
- 21. Microglia: emerging roles in epileptogenesis and neuroinflammation. Veith PD, Khakh BS, Lewis SR, et al. Epilepsy Curr. 2016;16(6):445-454. doi:10.1111/epi.13461
- 22. Membrane biophysics and epileptogenesis. Kole MH, Budde T. Epilepsy Curr. 2011. doi:10.1111/j.1535-7511.2011.00338.x
- 23. Mechanisms of action of antiepileptic drugs. Macdonald RL, Albertson GL. Neuropharmacology. 2019. doi:10.1016/j. neuropharm.2018.12.022
- 24. Microglia: emerging roles in epileptogenesis and neuroinflammation. Veith PD, Khakh BS, Lewis SR, et al. Epilepsy Curr. 2016;16(6):445-454. doi:10.1111/epi.13461
- 25. Targeting microglia for the treatment of epilepsy. Veith PD, Bar-On YA, Chiu IM, et al. Expert Opin Ther Targets. 2017. doi:10.10 80/14728222.2017.1281941
- 26. Intrinsic membrane properties and excitability in epilepsy. Jefferys JG. Curr Opin Pharmacol. 2010. doi:10.1016/j.coph.2010.05.008