

We selected 85 CSF samples from patients, 26 of them with the active form of NCC, 17 with inactive form of NCC, and 42 with other neurological diseases. The selection was based on clinical, tomographic and CSF basis.

It was observed that the inactive form of NCC presents an immunological profile similar to that of the group without NCC. The active form presents elevation of all specific immunoglobulins studied being that pattern heterogeneous in each class, being highest the participation of IgG, IgM, IgE and IgA in decrescent order.

The highest values of mean optical density was observed in the cases with intraventricular cysts or signs of inflammation in the CSF and in the cases with multiple clinical manifestations.

The diagnostic potential of each immunoenzymatic test was assayed. The ELISA IgG showed the highest value, with sensibility of 88.5% and specificity of 93.2%.

The present study confirmed the importance of ELISA in the immunological diagnosis of NCC, particularly in the active forms.

**KEY WORDS: neurocysticercosis, cerebrospinal fluid, immunological diagnosis, ELISA, cysticerci specific immunoglobulins (IgG, IgM, IgE, IgA).**

\* Reações imunoenzimáticas para detecção de IgG, IgM, IgE e IgA anticisticercose no líquido cefalorraquiano na neurocisticercose (Resumo). Dissertação de Mestrado, Faculdade de Medicina de Ribeirão Preto da Universidade de São Paulo (Área: Neurologia). Orientador: Osvaldo Massaiti Takayanagai.

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**HORMONAL DYSFUNCTION IN HUMAN REPRODUCTION AND COMPLEX PARTIAL SEIZURES (Abstract)\*. DISSERTATION. SÃO PAULO, 1977.**

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The decrease of fertility in epileptic women has been reported since 1950 and has been confirmed by recent epidemiologic studies. This phenomenon could be attributed to the use of antiepileptic drugs, psychosocial disruptions or hyposexuality, almost frequently observed in the epileptic patients. Lately, endocrine syndromes have also been reported in epileptic women and these syndromes have been connected to the decrease of fertility. We refer in particular to the polycystic ovarian syndrome, which occurs more frequently in women who are carriers of epilepsy, if compared with the general population. Some points could be considered when we try to explain this phenomenon.

At first, it might be that the epileptic activity, through paroxysmal discharges reaching the hypothalamus, affected the hormonal activity, particularly the pulse generator of gonadotropin releasing hormone (GnRH).

On the other hand, endocrine changes resulting from anovulatory cycles could be related to the breaking out of epileptic discharges, possibly by direct action from this abnormally high hormonal concentration in the limbic structures.

At last, the decrease of epileptic seizures threshold and the dysfunction of GnRH secretion could be connected to an alteration of the neurotransmitters balance.

These aspects, isolated or on the whole, could be responsible for the alteration of pulsatility of luteinizing hormone. This fact, at a long term period and under effect of further factors, could come to light as endocrine changes in the reproductive region with clinical effects.

The main objective of this investigation is to study on the torch of the available literature, the possible connection between epileptic seizures from the temporal lobe and the polycystic ovarian syndrome. This investigation also makes comments on revised data of the existing literature regarding to the involved anatomic structures, the performance of antiepileptic drugs, and the possible interference of psychosocial factors.

**KEY WORDS: epilepsy, complex partial seizures, hormonal dysfunction, luteinizing hormone.**

\*Disfunção hormonal em reprodução humana e epilepsias parciais complexas (Resumo). Dissertação de Mestrado, Faculdade de Medicina da Universidade de São Paulo (Área: Neurologia). Orientador: Luís dos Ramos Machado.

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