

A comprehensive, computer-based, online search of the world literature on the 3 DTCA was performed (MEDLINE, LILACS, EMBASE, COCHRANE LIBRARY). All probable terms for 3DTCA were determined from initial experience with the literature on the topic. These included "CT angiography", "computerized tomographic angiography", "computerized tomography angiography", "computer tomography angiography", "computer tomographic angiography", "three dimensional computed angiography"; the relevant terms used were "subarachnoid hemorrhage" e "aneurysm(s)". The initial criteria for inclusion in the systematic review were study design and examination methodology, image review process and presentation of result data.

The results demonstrated that the 26 studies identified by using this search, with total of the 1.483 intracra-

nial aneurysms diagnosed through the digital subtraction angiography and 1.391 (94%) of these diagnosed at the 3DCTA and the smaller size was 2mm. The intracavernous carotid aneurysms were the majority of the false negative results.

In conclusion, the sensitivity of the 3DCTA was the 95% as 100% by 63% these studies and the specificity was the 95% as 100% by 50% these studies. The smaller size of the intracranial aneurysms diagnosed was 2 mm, with the false negative cases more frequent were the intracavernous carotid aneurysms(25%) because of the proximity with bone structures; the middle cerebral artery aneurysms (19%) because of the presence the loops and posterior communicating artery aneurysms because of the infundibular dilatation.

KEY WORDS: cerebral aneurysms, angiotomography.

*O valor da angiotomografia tridimensional no diagnóstico dos aneurismas intracranianos quando comparado ao método standard (angiografia digital convencional): revisão sistemática da literatura.(Resumo). Dissertação de Mestrado, Universidade Federal de São Paulo, UNIFESP / EPM (Área: Neurocirurgia). Orientador: Fernando Menezes Braga.

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EVALUATION OF KETOGENIC DIET EFFICACY IN PATIENTS WITH REFRACTORY EPILEPSY (ABSTRACT)*. DISSERTATION SÃO PAULO, 2004.

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Ketogenic diet (KD) is a high fat, low carbohydrate and adequate-protein intake diet, developed in the 1920's as an attempt to control refractory epilepsy. Its mechanism of action is poorly known, but its efficacy is well defined.

This study analyzed the KD effects on a group of 54 children and adolescents with refractory epilepsy who were consecutively enrolled in the KD program of the Children's Institute of the University of São Paulo.

Efficacy (seizure control and anti-epileptic drug, AED, dose reduction), tolerability and adverse-effects were studied in the 2nd, 6th, 12th and 24th month on diet. Response to KD was considered effective (E) if seizure control was > 75%, good (G) when 50-75% and ineffective (I) when <50% and, when possible, was correlated with the epileptic syndrome and the patient age.

By the second month on diet, 57.4% of the patients had E response and 31.4% G. At the 6th-month, 63.8% of the patients had E response and 25.5% G. At the 12th-month, 71.8% had E response and 2.6% G results. At the 24th-month, 62.1% had E and 37.9% G results. There was significant reduction of AED; the best response was achieved in patients with generalized epilepsy and age-related differences were not observed. Four patients experienced adverse effects that led to interrupt the diet.

Conclusion: KD proved to be an effective clinical treatment for children with difficult-to-control seizures, often-allowing reduction or discontinuation of medication. Moreover, it is well tolerated and rarely presents adverse effects.

KEY WORDS: children, refractory epilepsy, ketogenic diet.

"Avaliação da eficácia da dieta cetogênica em pacientes com epilepsia de difícil controle (Resumo). Dissertação de Mestrado, Universidade de São Paulo, USP(Área: Pediatria). Orientadora: Maria Joaquina Marques-Dias.

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