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: We report a case series of 9 patients with chronic medically refractory autoimmune epilepsy and assess their common clinical features. Immune mediated seizures are most commonly reported in the context of encephalitis or encephalopathy, with few reports focussing on lone epilepsy in the outpatient setting. Our aim is to de ne the diagnostic clues that might be present in these cases.

M : We performed a retrospective review of all patients presenting to the outpatient department of the Advances Epilepsy unit who underwent autoimmune screening. All patients with a positive result for an antibody known to be associated with epilepsy were included.

: 63 patients underwent testing. 13 returned a positive result, however only 9 of these were patients which chronic epilepsy that did not present with an acute illness. Common features in these cases included: Perisylvian semiology, EEG abnormalities in the mid temporal region, normal or non-speci c MRI ndings, depression and head injury.

: In cases of medically refractory, lesion negative epilepsy, with predominantly perisylvian semiology, clinicians should have a high level of suspicion for the diagnosis of autoimmune aetiologies, and a low threshold to perform autoantibody screening. is is especially true if there is a previous history of head injury or co-morbid depression.