

The one year period incidence rate of epilepsy is presented in Table (II). During the study period 45 new active cases were diagnosed giving an incidence rate of 5.96/100,000 insured persons. The incidence rate was insignificantly higher among males (6.21/100,000) than females (5.15/100,000); $\chi^2_1 = 0.26$.

Table (III) shows that the point prevalence rate of active epilepsy among health insured population in Alexandria as on 28th of February 1989 was 141.4/100,000 beneficiaries. The prevalence rate among males (156.1/100,000) was significantly higher than that of females (92.7/100,000); $\chi^2_1 = 38.31$.

DISCUSSION

Data about the incidence and prevalence of epilepsy is not only scanty but also it is inconsistent especially in the Arab and African countries. Shorvon and Farmer (1988) indicated that such inconsistency could be due to differences in definitions of seizures and epilepsy, variability of case selection, and duration of follow-up, as well as differences in age group composition and in methods of data collection.

Registration is an important item in health care activities, and its importance is more emphasized in situations like epilepsy, which is a world wide problem with severe personal, familial and social impact. Without a case register one cannot identify the same individual as he enters a system of health care, moves around in it, leaves it, and perhaps reenters it later (Koul *et al.*, 1988). This was completely true in relation to the recorded data about epileptics in the Alexandria health insurance records. It was possible to obtain data about cases from the different treatment settings, but it was not possible to follow an individual as he progresses through them. Therefore, many cases were included in the patient count several times (multiple counting). This was a common situation in all the different polyclinics, where epileptics report for reexamination and collection of drugs every one to three months.

Several studies indicated that the incidence rate of epilepsy ranges from 11/100,000/year to 134/100,000/year (Granieri *et al.*, 1983; Li *et al.*, 1985; Sander and Shorvon, 1987). The results of the present study indicated that the incidence rate of the disease among health insured population in Alexandria was extremely low (6/100,000/year). Shorvon