Epilepsy Surgery  
(Corpus callosotomy)

What is Corpus Callosotomy?
This surgery has been very effective for children who have generalized seizures, especially drop attacks. It may reduce how often and how severe your child’s seizures are. It will not cure your child’s epilepsy or leave your child seizure-free. In this surgery the corpus callosum is cut.

What is the corpus callosum?
The brain is divided into two sides called the right and left hemisphere. The two sides are connected by a thick band of nerve fibers called the corpus callosum. The corpus callosum is like a bridge that lets the two sides share information across it. It is not the only bridge the brain has for sharing information, but it is the main one.

By cutting the corpus callosum the abnormal electrical discharges cannot spread from one side to the other.

How is the surgery done?
A neurosurgeon, a surgeon who specializes in brain surgery, will do the surgery.

- A small piece of your child’s skull at the top of the head is removed.
- A piece of the membrane that covers the brain, called dura, is gently pulled back.
- A surgical microscope and special instruments and are used to cut the corpus callosum. Nothing is taken out.
- When the surgery is done, the dura is closed and the piece of skull is put back on. The skin is closed using stitches.

After surgery your child will go to the recovery room and then to the Intensive Care Unit (ICU) for 1 to 2 nights. When your child is more alert, they will go to a regular room in the hospital. Normally your child will be ready to go home in about 6 to 8 days.

Are there side effects?
There are some common side effects after a corpus callosotomy. All of them are temporary and will improve but they may cause recovery to take longer. This could mean that your child will be in the hospital longer. Side effects may include:
Side effects (continued)

- **Fever:** This is common in the first 3 days after surgery. A fever that occurs this soon after surgery does not mean infection.

- **Long period of decreased consciousness:** This can last up to two weeks after the surgery but normally lasts less than 4 days. It can be very hard to see your child like this. Remember, it is just temporary and it will get better.

- **Weakness on the left side of the body:** This can last for several days and can involve the left side of the face, arm and leg.

- **Decrease in appetite and thirst:** In rare cases a feeding tube may be needed. It lets us give nutrition until your child’s appetite returns. The tube goes in the nose and down to the stomach.

Most often, the benefits of this surgery are seen within days of the surgery. The results normally last a long time. Your child will keep taking seizure medicines after the surgery to maximize seizure control. A small percent of patients’ epilepsy will slowly get worse again over time. This may happen months to years after surgery. The reason for this is not known. The majority of patients have long term improvement in seizure control.

Please call the epilepsy surgery coordinator with any questions or concerns you have about the epilepsy surgery process at Children’s Hospital of Wisconsin.

*This teaching sheet is meant to help you care for your child. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment, and follow-up.*