We offer patients with drug resistant epilepsy (aged 9+) eTNS and audit outcome. A self-adhesive electrode is placed on the forehead stimulating both trigeminal nerves (120 Hz, 30 seconds on/off). Patients set the current (noticeable/comfortable, <10mA, aiming >8 hours overnight).

**Results**

Seven children started eTNS but two discontinued early (headache). Another developed transient hypopigmentation from the adhesive. Outcome for other 5 awaited.

Sixteen adult started eTNS before October 2013. Two discontinued early (disliked sensation/unhappy with seizure pattern) and one after 15 weeks (efficacy). The remaining tolerated eTNS, completing 18 weeks; 8 chose to continue (116–277 days to date). One had transient forehead reddening when hot. eTNS was worn for 6½–12 hours/night with currents 2.6–7.6 mA. Efficacy could not be assessed in four.

Of the remaining 10, seizure rate reduced from baseline 2.9 ±1.9 to 2.2±1.5 at 18 weeks (p=0.07): 5 had a greater than 30% reduction (one 50%). QOLIE-10w improved from 37±26 (n=12) to 18±17 (n=10), p=0.02, and BDI from 12±8 (n=12) to 6±5 (n=10), p=0.01. There was significant improvement in Pittsburgh and Epworth scales (p=0.04).

These data support the safety, efficacy and tolerability of eTNS.