Supplementary material associated with the manuscript, "Long-term neuropsychological trajectories in children with epilepsy: Does surgery halt decline?"

**Supplementary Table 1.** Neuropsychological tests.

Test	Test	Neuropsychological	Test subscale
	version	domain	
WISC	V	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index
		Performance IQ	Fluid Reasoning Index
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WISC	IV	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index
		Performance IQ	Perceptual Reasoning Index
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WISC	III	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index <sup>a</sup>
		Performance IQ	Perceptual Organisation Index b
		Working Memory	Working Memory Index <sup>c</sup>
		Processing Speed	Processing Speed Index
WPPSI	R	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal IQ
		Performance IQ	Performance IQ
		Working Memory	-
		Processing Speed	-
WPPSI	IV	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index
		Performance IQ	Fluid Reasoning Index
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WPPSI	III	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal IQ
		Performance IQ	Performance IQ
		Working Memory	-
		Processing Speed	<b>Processing Speed Quotient</b>
WAIS	IV	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index
		Performance IQ	Perceptual Reasoning Index
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WAIS	R	FSIQ	Full-Scale IQ
		*	~

		Verbal IQ	Verbal IQ
		Performance IQ	Performance IQ
		Working Memory	-
		Processing Speed	-
WAIS	IV	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index
		Performance IQ	Perceptual Reasoning Index
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WAIS	III	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal Comprehension Index <sup>a</sup>
		Performance IQ	Perceptual Organisation Index b
		Working Memory	Working Memory Index
		Processing Speed	Processing Speed Index
WASI	-	FSIQ	Full-Scale IQ
		Verbal IQ	Verbal IQ
		Performance IQ	Performance IQ
		Working Memory	-
		Processing Speed	-

<sup>&</sup>lt;sup>a</sup> If Verbal Comprehension Index was not available, then Verbal IQ was used.

## **Supplementary Table 2.** Available neuropsychology assessments, both before and after surgery (N = 500).

Number and type of assessment(s)			
At least one preoperative assessment	453		
Multiple preoperative assessments	144		
At least one postoperative assessment	361		
Multiple postoperative assessments	116		
At least one preoperative and one postoperative assessment	314		

 $<sup>^{\</sup>it b}$  If Perceptual Organisation Index was not available, then Performance IQ was used.

<sup>&</sup>lt;sup>c</sup> If Working Memory Index was not available, then Freedom from Distractibility Index was used.

**Supplementary Table 3.** Demographic information and clinical characteristics (N = 500).

Sex N (% of total sample)	
Males	252 (50)
Females	248 (50)
Ethnicity N (% of total sample)	
Asian	28 (6)
Black	22 (4)
Mixed	10 (2)
White	390 (78)
Other	7(1)
Ethnicity not asked or given	43 (9)
Handedness N (% of total sample)	
Right	348 (70)
Left	100 (20)
No clear hand preference/Ambidextrous	14 (3)
Missing data	38 (8)
Educational status N (% of total sample)	· · ·
Mainstream school	191 (38)
Mainstream school with support	157 (31)
SEN school	59 (12)
Home-schooled/Residential home	13 (3)
Not of school age	52 (10)
Missing data	28 (6)
Epilepsy characteristics years, Md [IQR] (range)	· · · · · · · · · · · · · · · · · · ·
Age at first seizure <sup>a</sup>	3.0 [1.0, 6.0] (0-15.3)
Age of epilepsy onset	3.2 [1.2, 6.5] (0-15.3)
Age at surgery <sup>b</sup>	11.9 [7.8, 15.0] (0.2-19.5)
Duration of epilepsy at time of surgery	6.1 [3.9, 9.6] (0.1-18.4)
Antiseizure medication (ASM) N (% of total	
sample)	
Number of ASMs at preoperative evaluation	
0	6(1)
1	111 (22)
2	208 (42)
3	124 (25)
4+	40 (8)
Missing data	11 (2)
Total number of ASMs trialled (from epilepsy	
onset to surgery) <sup>c</sup>	
0	1 (<1)
1-2	82 (16)
3-4	176 (35)
	` '

5-6	126 (25)
7-8	61 (12)
9+	31 (6)
Missing data	23 (5)
<b>Preoperative MRI findings</b> N (% of total sample)	
MRI laterality	
Left	240 (48)
Right	202 (40)
Bilateral	38 (8)
Negative	18 (4)
Not applicable	1 (<1)
Missing data	1 (<1)
MRI status	
Focal	324 (65)
Diffuse	117 (23)
Multifocal	40 (8)
Negative	18 (4)
Missing data	1 (<1)
Genetic findings N (% of total sample)	· · · · ·
Pathogenic/likely pathogenic SNV	11 (2)
CNV	2 (<1)
Benign/likely benign SNV	10(2)
No variant identified	34 (7)
No test administered	443 (89)
<b>Surgery information</b> N (% of total sample)	· /
Type of surgery	
Lesionectomy	208 (42)
Lobectomy	174 (35)
Hemispherotomy	80 (16)
Disconnection	16 (3)
Corpus callosotomy	11 (2)
Lobectomy + Disconnection	7(1)
Lesionectomy + Lobectomy	4 (<1)
Side operated on	
Left	227 (45)
Right	261 (52)
Not applicable <sup>d</sup>	12 (2)
Lobe operated on	(-)
Temporal	236 (47)
Frontal	90 (18)
Multilobar	37 (7)
Parietal	33 (7)
Occipital	10 (2)
- Coopina	10 (2)

Insular	2 (<1)
Not applicable <sup>e</sup>	92 (18)
Histopathology diagnosis	
LEAT	126 (25)
MTS	75 (15)
FCD-II	71 (14)
Scarring	40 (8)
NSC	35 (7)
MCD-Other	25 (5)
Rasmussen encephalitis	23 (5)
Vascular	18 (4)
Tuberous sclerosis	11 (2)
N-LEAT	8 (2)
Normal result	7 (1)
FCD-NOS	6(1)
M-MCD	2 (<1)
Histopathology not collected or report not available	53 (11)

Abbreviations: ASM = antiseizure medication; CNV = copy number variation; DNET = dysembryoplastic neuroepithelial tumour; FCD-II = focal cortical dysplasia type-II; FCD-NOS = focal cortical dysplasia not otherwise specified; IQR = interquartile range; LEAT = low-grade epilepsy-associated tumour; MCD-Other = malformation of cortical development-other; Md = median; M-MCD = mild malformation of cortical development; MTS = mesial temporal sclerosis; NA = not applicable; N-LEAT = non-low-grade epilepsy-associated tumour; NSC = non-specific epilepsy-associated changes; SD = standard deviation; SEN = special educational needs; SNV = single nucleotide variation.

<sup>&</sup>lt;sup>a</sup> Age at first seizure and Age of epilepsy onset were kept distinct to account for early, isolated occurrences of febrile seizures.

<sup>&</sup>lt;sup>b</sup> Three patients were 19 years of age at time of surgery.

<sup>&</sup>lt;sup>c</sup> One patient had not been trialled on any ASMs prior to surgery due to parental preference. A small proportion of patients (N = 32 patients; 6% of the cohort) had been trialled on one ASM prior to surgery; however, they all had a clearly defined lesion on their preoperative MRI scan and the clinical team recommended they proceed to surgery due to the high likelihood of drug-resistance.

<sup>&</sup>lt;sup>d</sup> Not applicable was assigned to focal resections that involved the removal of a hypothalamic hamartoma.

<sup>&</sup>lt;sup>e</sup> Not applicable was assigned to hemispherotomy as well as focal resections that involved the removal of a hypothalamic hamartoma.

**Supplementary Table 4.** Past and current seizure information (N = 500).

Supplementary Table 1. Tust and current serzare information	1 (11 500).
Family history of epilepsy $N$ (% of total sample)	
Yes	144 (29)
No	322 (64)
Missing data	34 (7)
Seizure history N (% of total sample)	
History of infantile spasms	
Yes	33 (7)
No	417 (83)
Missing data	50 (10)
History of status epilepticus	
EPC	17 (3)
Non-convulsive	7 (1)
Convulsive	63 (13)
Mixed	6 (1)
None	358 (72)
Missing data	49 (10)
History of generalised tonic-clonic seizures	
Yes	205 (41)
No	241 (48)
Missing data	54 (11)
Seizures at time of preoperative evaluation $N$ (% of	
total sample)	
Spasms	
Yes	37 (7)
No	416 (83)
Missing data	47 (9)
Number of seizure types	
0	5 (1)
1	219 (44)
2	154 (31)
3	50 (10)
4	16 (3)
5	1 (<1)
6	2 (<1)
Missing data	53 (11)

Abbreviations: EPC = epilepsia partialis continua.

**Supplementary Table 5.** Comparison between cohorts with a single versus multiple preoperative assessments, a single versus multiple postoperative assessments, as well as surgical patients with and without neuropsychology assessment.

- 11-8-11-11-11-11-11-11-11-11-11-11-11-11	with and without near	professional designation of the professional designation of th	I
	One versus multiple preoperative assessments	One versus multiple postoperative assessments	Surgical cohort with versus without neuropsychological assessment
Sex	ns	ns	ns
Handedness	ns	ns	*** The surgery cohort without neuropsychology was more likely to have no hand preference or be left-handed
Educational status	ns	ns	*** The surgery cohort without neuropsychology was more likely to not be of school age or attend a special educational needs school
Preoperative FSIQ	ns	ns	-
Family history of epilepsy	ns	ns	ns
Genetic diagnosis of epilepsy	ns	ns	*** The surgery cohort without neuropsychology was more likely to have a genetic diagnosis of epilepsy  ***
Age of epilepsy onset	ns	ns	The surgery cohort without neuropsychology had a younger age of epilepsy onset; Md <sub>surgery only</sub> = 0.4, IQR <sub>surgery only</sub> = (0.1, 1.2) versus Md <sub>surgery &amp; neuropsychology</sub> = 3.2, IQR <sub>surgery &amp; neuropsychology</sub> = (1.4, 6.5)
Age at surgery	** Patients with one assessment had a younger age at surgery; Md <sub>single</sub> = 11.8, IQR <sub>single</sub> = (7.9, 15.0) versus Md <sub>multi</sub> = 13.4, IQR <sub>multi</sub> = (10.4, 15.6) **	ns	***  The surgery cohort without neuropsychology had a younger age at surgery;  Md <sub>surgery only</sub> = 5.3, IQR <sub>surgery only</sub> = (2.4, 8.9) versus  Md <sub>surgery &amp; neuropsychology</sub> = 11.9, IQR <sub>surgery &amp; neuropsychology</sub> = (7.8, 15.0)
Duration of epilepsy	** Patients with one assessment had	ns	*** The surgery cohort without neuropsychology had

	shorter duration of epilepsy; $Md_{single} = 6.0$ , $IQR_{single} = (3.9, 9.7)$ versus $Md_{multi} = 8.2$ , $IQR_{multi} = (5.3, 10.8)$		shorter duration of epilepsy; $ \begin{aligned} & \text{Md}_{\text{surgery only}} = 3.7, \text{IQR}_{\text{surgery only}} \\ & \text{only} = (1.9, 6.8) \text{ versus} \\ & \text{Md}_{\text{surgery \& neuropsychology}} = 6.3, \\ & \text{IQR}_{\text{surgery \& neuropsychology}} = \\ & (3.9, 9.8) \end{aligned} $
History of infantile spasms	ns	ns	The surgery cohort without neuropsychology was more likely to have a history of infantile spasms  ***
Spasms at time of preoperative evaluation	ns	ns	The surgery cohort without neuropsychology was more likely to have spasms at the time of preoperative evaluation
History of GTC seizures	ns	ns	ns
Number of seizure types at preoperative assessment	ns	ns	ns
Number of ASMs at preoperative assessment	ns	ns	***  The surgery cohort without neuropsychology was receiving a greater number of different ASMs at the time of preoperative evaluation; M <sub>surgery only</sub> = 2.6, SD <sub>surgery only</sub> = 1.0 versus M <sub>surgery &amp; neuropsychology</sub> = 2.2, SD <sub>surgery &amp; neuropsychology</sub> = 1.0
Total number of ASMs trialled from epilepsy onset to preoperative evaluation	***  Patients with one assessment had trialled a smaller number of different ASMs over the course of their epilepsy;  M <sub>single</sub> = 4.4, SD <sub>single</sub> = 2.1 versus M <sub>multi</sub> = 5.5, SD <sub>multi</sub> = 2.6	ns	***  The surgery cohort without neuropsychology had trialled a larger number of different ASMs over the course of their epilepsy;  M <sub>surgery only</sub> = 5.4, SD <sub>surgery only</sub> = 2.6 versus  M <sub>neuropsychology</sub> = 4.6,  SD <sub>neuropsychology</sub> = 2.4
MRI laterality	ns	ns	*** The surgery cohort without neuropsychology was more likely to have bilateral MRI abnormalities or be MRI negative

	T		
Type of MRI abnormality	Patients who had multiple assessments were more likely to have non-focal (diffuse or multifocal) MRI abnormalities or be MRI negative	ns	*** The surgery cohort without neuropsychology was more likely to have non-focal (diffuse or multifocal) MRI abnormalities or be MRI negative
Procedure type	ns	ns	*** The surgery cohort without neuropsychology was more likely to have undergone corpus callosotomy or hemispherotomy
Side operated on	ns	ns	ns
Lobe operated on	ns	ns	*** The surgery cohort without neuropsychology was more likely to have undergone corpus callosotomy, hemispherotomy or multilobar surgery
Histopathology	ns	ns	*** The surgery cohort without neuropsychology was more likely to have a diagnosis of MCD-Other, FCD-II, and Scarring
Seizure outcome	ns	ns	*** The surgery cohort without neuropsychology was more likely to not be seizure-free
Postoperative ASM status	ns	ns	ns

p-values were obtained following correction for multiple comparison using the Holm method, which was applied sequentially to each column.

Abbreviations: ASM = antiseizure medication; FCD-II = focal cortical dysplasia type II; FSIQ = Full-Scale IQ; GTC = generalised tonic-clonic seizures; IQR = interquartile range; M = mean; Md = median; MCD-Other = malformation of cortical development-other; ns = not significant; SD = standard deviation.

<sup>\*</sup>p < 0.05

<sup>\*\*</sup>p < 0.01

<sup>\*\*\*</sup>p < 0.001

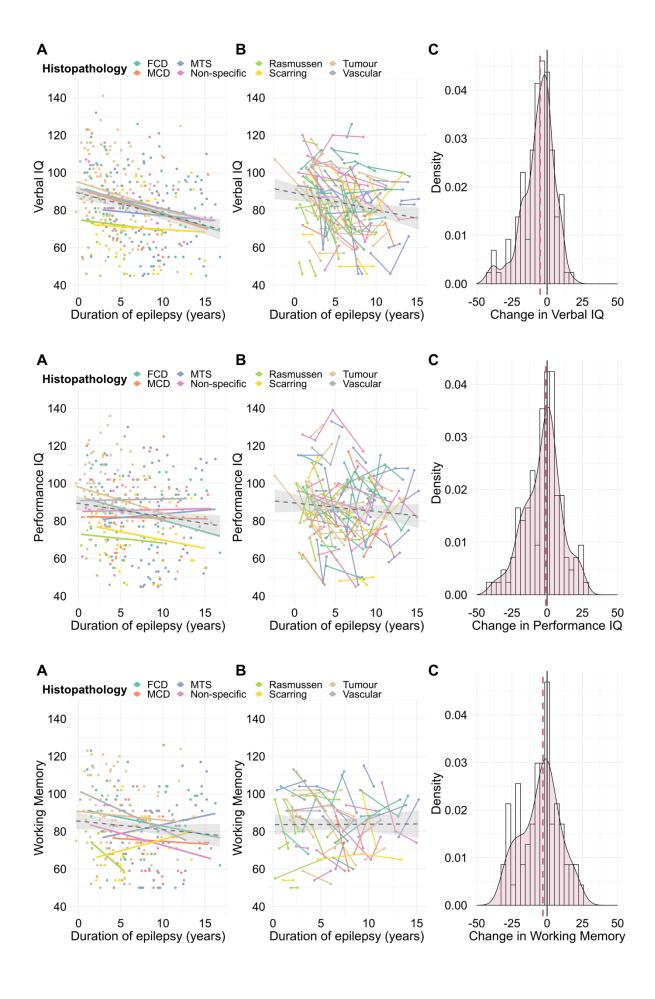
Supplementary Table 6. Mixed-effects linear regression analyses: preoperative neuropsychological changes in Rasmussen encephalitis versus non-progressive aetiologies.

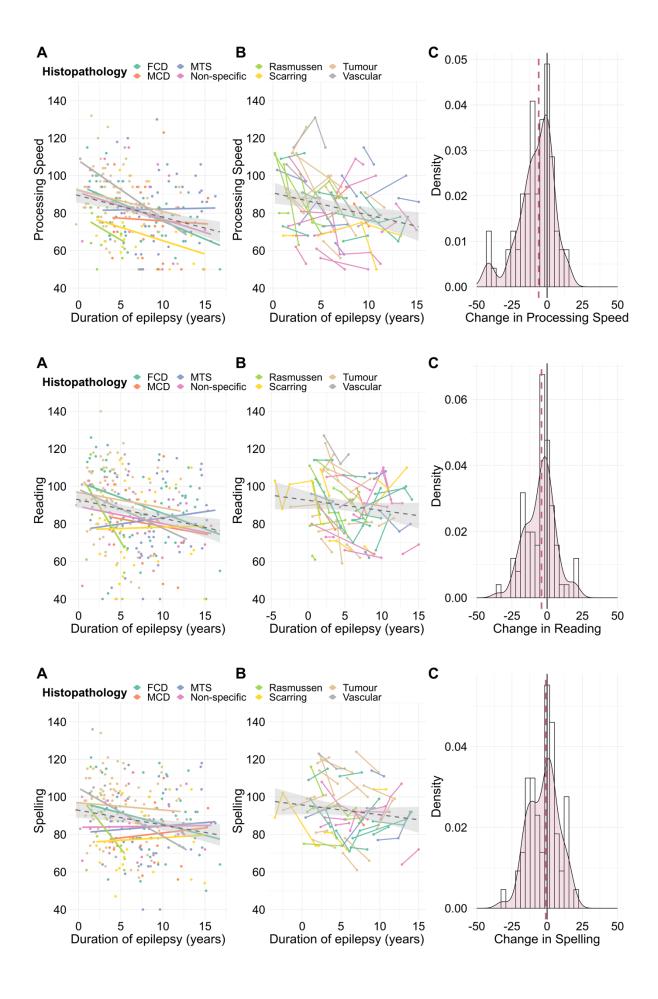
Model	β	SE	р
FSIQ	r		r
Duration of epilepsy	-1.9	0.3	<0.001 ***
Aetiology: Rasmussen encephalitis	-7.9	5.7	0.166
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-2.7	1.1	0.020 *
Verbal IQ			
Duration of epilepsy	-1.6	0.2	<0.001 ***
Aetiology: Rasmussen encephalitis	-8.9	4.9	0.070
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-1.3	1.0	0.193
Performance IQ			
Duration of epilepsy	-1.1	0.2	<0.001 ***
Aetiology: Rasmussen encephalitis	-8.1	5.4	0.138
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-1.7	1.2	0.153
Working Memory			
Duration of epilepsy	-0.8	0.3	0.001 **
Aetiology: Rasmussen encephalitis	-11.9	6.8	0.080
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-0.3	1.5	0.827
Processing Speed			
Duration of epilepsy	-1.4	0.2	<0.001 ***
Aetiology: Rasmussen encephalitis	-0.2	6.1	0.975
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-3.4	1.4	0.017 *
Reading			
Duration of epilepsy	-1.0	0.2	<0.001 ***
Aetiology: Rasmussen encephalitis	0.8	6.3	0.904
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-1.9	1.3	0.141
Spelling			
Duration of epilepsy	-0.9	0.2	<0.001 ***
Aetiology: Rasmussen encephalitis	-2.9	6.4	0.655
Duration of epilepsy * Aetiology: Rasmussen encephalitis	-0.4	1.3	0.759
Numeracy			
Duration of epilepsy	-1.6	0.3	<0.001 ***
Aetiology: Rasmussen encephalitis	-16.1	6.7	0.017 *
Duration of epilepsy * Aetiology: Rasmussen encephalitis	1.3	1.4	0.367

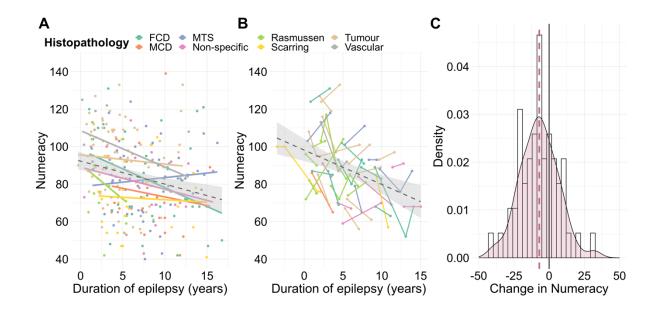
Abbreviations: FSIQ = Full-Scale IQ; SE = standard error.

<sup>\*</sup>p <0.05 \*\*p <0.01

<sup>\*\*\*</sup>p < 0.001

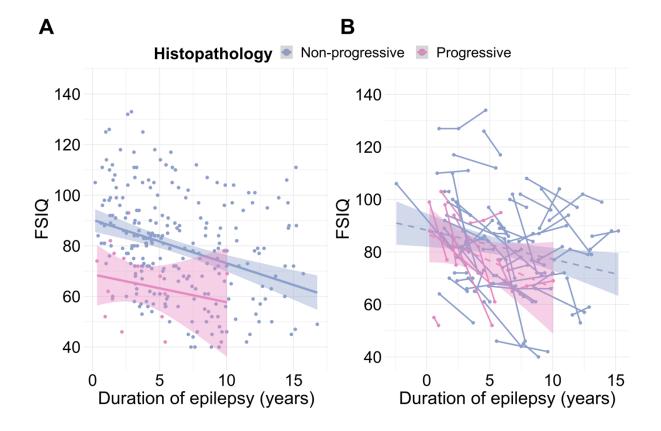


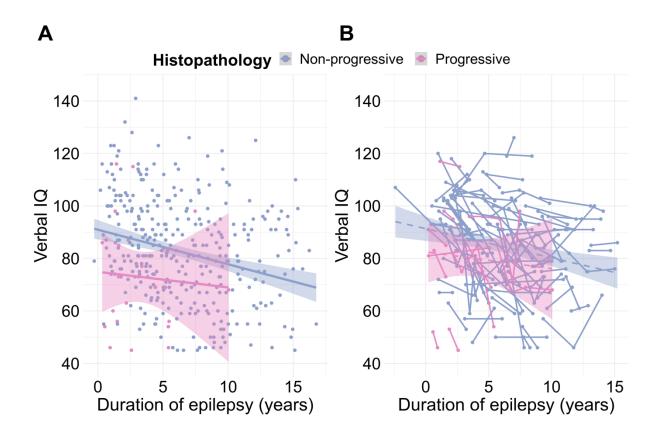


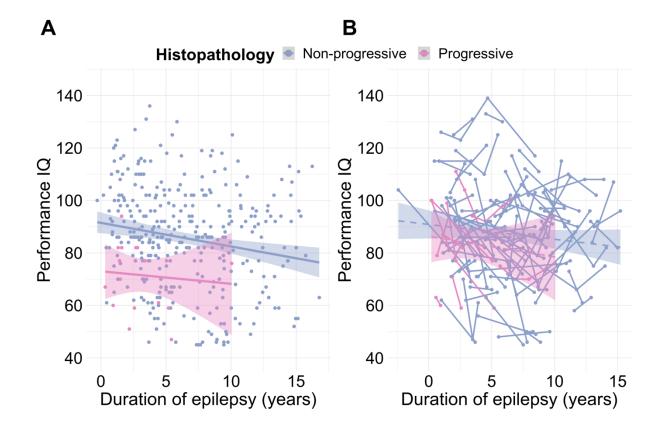


Supplementary Fig. 1. Preoperative changes in neuropsychological performance (A) Cross-sectional preoperative trajectories in Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy across different aetiologies. A single preoperative assessment was included for each patient. If patients had more than one preoperative assessment, the assessment closest to surgery was chosen. Linear modelling was fitted to all data points (dotted lines); shaded areas represent the 95% confidence intervals. (B) Longitudinal preoperative trajectories in Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy across different aetiologies. Only patients with two or more preoperative assessments were included in the visualisation. All preoperative assessments were included for each patient. Linear modelling was fitted to all data points (dotted lines); shaded areas represent the 95% confidence intervals. (C) Individual change in preoperative Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy. The distribution of change scores is represented using a density plot. The change score for each patient was computed by subtracting the patient's first preoperative score from their last preoperative score. The median change score is displayed with a dashed purple line. Only patients with two or more preoperative assessments were included in the visualisation (patients with unknown histopathology result were also included).

Abbreviations: FCD = focal cortical dysplasia; MCD = malformation of cortical development; MTS = mesial temporal sclerosis.







Supplementary Fig. 2. Preoperative changes in neuropsychological performance in progressive versus non-progressive aetiologies (A) Cross-sectional preoperative trajectories in FSIQ, Verbal IQ, and Performance IQ in Rasmussen encephalitis (pink) versus non-progressive aetiologies (blue). A single preoperative assessment was included for each patient. If patients had more than one preoperative assessment, the assessment closest to surgery was chosen. Linear modelling was fitted to all data points, according to aetiology (solid pink lines for Rasmussen encephalitis and solid blue lines for non-progressive aetiologies); shaded areas represent the 95% confidence intervals. (B) Longitudinal preoperative trajectories in FSIQ, Verbal IQ, and Performance IQ in Rasmussen encephalitis (pink) versus non-progressive aetiologies (blue). Only patients with two or more preoperative assessments were included in the visualisation. All preoperative assessments were included for each patient. Linear modelling was fitted to all data points, according to aetiology (dotted pink lines for Rasmussen encephalitis and dotted blue lines for non-progressive aetiologies); shaded areas represent the 95% confidence intervals. Working Memory, Processing Speed, Reading, Spelling, and Numeracy were excluded due to small *N*.

Abbreviations: FSIQ = Full-Scale IQ.

**Supplementary Table 7.** Change in preoperative neuropsychological performance, from first to last preoperative assessment.

	First pre-operative assessment			Last pre-operative assessment										
		Duration	Time	Duration Time	Time									
	Age, years, Md [IQR] (range)	of epilepsy, years, Md [IQR] (range)	prior to surgery, years, Md [IQR] (range)	Score, Md [IQR] (range)	Age, years, Md [IQR] (range)	of epilepsy, years, Md [IQR] (range)	prior to surgery, years, Md [IQR] (range)	Score, Md [IQR] (range)	Change score, Md [IQR] (range)	р	Improved N (%)	Stable N (%)	Declined N (%)	Yearly change, M [SD] (range)
IQ domains														
FSIQ $N = 84$	9.2 [7.0, 11.8] (3.5, 16.3)	4.6 [2.0, 6.6] (-2.0, 13.1)	2.9 [2.1, 5.0] (0.6, 10.3)	83 [69, 95] (45, 127)	12.4 [9.0, 14.5] (4.4, 18.2)	7.0 [4.5, 9.7] (0.9, 15.2)	0.9 [0.5, 1.4] (0.0, 5.2)	75 [64, 87] (40, 134)	-5 [-11, 2] (-46, 15)	0.021	3 (4%)	56 (67%)	25 (30%)	-3 [7] (-33, 11)
Verbal IQ $N = 126$	9.2 [6.9, 11.5] (3.9, 16.3)	4.0 [2.0, 6.6] (-2.4, 13.1)	3.1 [2.2, 5.2] (0.6, 10.4)	87 [74, 99] (48, 120)	12.4 [9.7, 14.6] (5.1, 18.2)	7.2 [4.5, 99.8] (0.9, 15.2)	0.9 [0.6, 1.4] (0.0, 4.0)	79 [67, 91] (45, 126)	-5 [-12, 1] (-43, 18)	0.003	7 (6%)	81 (64%)	38 (30%)	-3 [6] (-23, 12)
Performance IQ $N = 123$	9.3 [7.1, 11.5] (3.9, 16.3)	4.5 [2.0, 6.6] (-2.4, 13.1)	3.1 [2.2, 5.3] (0.6, 10.4)	86 [73, 100] (46, 133)	12.5 [9.9, 14.6] (5.1, 18.2)	7.4 [4.6, 9.9] (0.9, 15.7)	0.9 [0.6, 1.4] (0.0, 4.0)	84 [71, 96] (45, 131)	-1 [-12, 4] (-40, 26)	0.209	18 (15%)	68 (55%)	37 (30%)	-1 [8] (-24, 33)
Working Memory $N = 68$	9.8 [8.8, 12.9] (5.5, 16.3)	4.4 [2.0, 6.8] (0.1, 13.1)	3.2 [2.2, 4.8] (1.0, 10.4)	86 [72, 97] (50, 115)	13.1 [11.4, 15.3] (5.8, 11.4)	7.2 [4.5, 9.6] (1.6, 15.2)	1.0 [0.6, 1.5] (0.0, 3.5)	80 [68, 91] (50, 112)	-3 [-14, 5] (-31, 23)	0.091	9 (13%)	37 (54%)	22 (32%)	-2 [9] (-43, 16)
Processing Speed N = 71	9.8 [8.6, 12.5] (5.2, 16.3)	4.3 [1.9, 7.0] (0.1, 13.1)	3.3 [2.3, 4.8] (0.8, 10.4)	88 [73, 97] (50, 117)	13.0 [11.3, 15.2] (6.0, 17.4)	7.1 [4.5, 9.9] (1.6, 15.2)	1.0 [0.6, 1.6] (0.0, 3.5)	78 [69, 88] (49, 126)	-6 [-14, 0] (-43, 15)	0.007	4 (6%)	40 (56%)	27 (38%)	-4 [6] (-28, 9)
Academic atta	ainment									II.				
Reading $N = 73$	9.3 [7.8, 11.2] (4.0, 15.4)	3.9 [2.0, 6.6] (-4.5, 12.9)	3.9 [2.5, 5.5] (0.6, 10.5)	91 [79, 104] (40, 127)	12.5 [10.8, 14.6] (5.9, 16.9)	7.2 [4.4, 9.8] (0.9, 15.7)	1.1 [0.7, 1.5] (0.0, 5.4)	85 [73, 98] (40, 117)	-4 [-13, 1] (-35, 20)	0.130	4 (5%)	46 (63%)	23 (32%)	-2 [6] (-32, 10)
Spelling $N = 63$	9.7 [8.1, 11.3]	4.3 [2.1, 6.6]	3.9 [2.6, 5.4]	89 [81, 100]	13.1 [11.4, 14.8]	7.2 [4.5, 9.9]	1.0 [0.7, 1.4]	92 [77, 100]	-1 [-11, 4] (-32, 19)	0.790	9 (14%)	37 (59%)	17 (27%)	-1 [5] (-23, 9)

	(5.4, 15.4)	(-3.5, 12.9)	(1.0, 10.5)	(47, 125)	(8.0, 16.8)	(1.6, 15.7)	(0.0, 5.4)	(44, 121)						
Numeracy $N = 56$	9.6 [8.1, 12.1] (5.4, 15.4)	4.1 [1.9, 6.5] (-3.5, 12.9)	3.3 [2.5, 5.0] (1.0, 10.5)	89 [75, 98] (53, 127)	12.4 [11.2, 14.7] (8.0, 16.9)	7.1 [3.7, 9.4] (1.6, 15.0)	1.0 [0.6, 1.7] (0.0, 5.4)	80 [65, 92] (42, 133)	-7 [-16, 1] (-40, 32)	0.039 *	6 (11%)	26 (46%)	24 (43%)	-4 [6] (-23, 12)

Abbreviations: IQR = interquartile range; M = mean; Md = median.

<sup>\*</sup>p < 0.05

<sup>\*\*</sup>p <0.01

<sup>\*\*\*</sup>p <0.001

**Supplementary Table 8.** Neuropsychology performance at the time of presurgical evaluation.

	Score, Md	<70	70-85	85-115	>115
	[IQR] (range)	N (%)	N (%)	N (%)	N (%)
IQ domains					
FSIQ	75 [61, 89]	115 (37%)	89 (29%)	94 (31%)	10 (3%)
N = 308	(40, 133)	113 (3770)	09 (2970)	94 (3170)	10 (370)
Verbal IQ	80 [67, 93]	129 (30%)	125 (29%)	159 (37%)	21 (5%)
N = 434	(45, 141)	129 (3070)	123 (2970)	139 (3770)	21 (370)
Performance IQ	84 [67, 96]	112 (27%)	95 (23%)	178 (43%)	25 (6%)
N = 410	(45, 136)	112 (2770)	93 (2370)	176 (4370)	23 (070)
Working Memory	80 [65, 94]	96 (32%)	71 (23%)	121 (40%)	15 (5%)
N = 303	(50, 126)	90 (3270)	/1 (23/0)	121 (4070)	13 (370)
Processing Speed	80 [68, 94]	88 (29%)	96 (31%)	112 (36%)	11 (4%)
N = 307	(49, 132)	00 (2770)	70 (3170)	112 (3070)	11 (470)
Academic attainm	ent				
Reading	86 [71, 100]	77 (23%)	78 (23%)	161 (48%)	19 (6%)
N = 335	(40, 140)	77 (2370)	76 (2370)	101 (4070)	17 (070)
Spelling	87 [73, 99]	59 (19%)	84 (27%)	148 (48%)	19 (6%)
N = 310	(40, 136)	37 (17/0)	04 (27/0)	140 (40/0)	19 (0/0)
Numeracy	82 [66, 97]	103 (33%)	68 (22%)	118 (38%)	21 (7%)
N = 310	(40, 139)	103 (3370)	00 (2270)	110 (30/0)	21 (7/0)

Abbreviations: FSIQ = Full-Scale IQ; IQR = interquartile range; Md = median.

**Supplementary Table 9.** Change in neuropsychological functioning from pre- to postoperative assessment, using the last preoperative assessment and the first postoperative assessment.

	Pre-	Post-				
	operative	operative				
	assessment	assessment	n	Improved	Stable	Declined
	score, Md	score, Md	р	N (%)	N(%)	N (%)
	[IQR]	(IQR)				
	(range)	(range)				
IQ domains	l			1		
FSIQ	78 [63, 95]	75 [64, 91]	0.769	24 (150/)	111 (710/)	22 (140/)
N = 157	(40, 133)	(40, 130)	0.768	24 (15%)	111 (71%)	22 (14%)
Verbal IQ	81 [69, 95]	81 [69, 95]	0.221	22 (110/)	201 (700/)	52 (100/)
N = 286	(45, 141)	(45, 130)	0.331	32 (11%)	201 (70%)	53 (19%)
Performance IQ	86 [72, 98]	86 [71, 100]	0.049	50 (190/)	172 (6/10/)	40 (190/)
N = 272	(45, 136)	(40, 138)	0.948	50 (18%)	173 (64%)	49 (18%)
Working Memory	83 [68, 94]	84 [68, 97]	0.529	44 (23%)	106 (55%)	41 (21%)
N = 191	(50, 126)	(50, 136)	0.329	44 (23 /0)	100 (3370)	41 (2170)
Processing Speed	83 [73, 94]	80 [70, 94]	0.515	37 (20%)	108 (57%)	43 (23%)
N = 188	(50, 132)	(49, 137)	0.313	37 (2070)	108 (3770)	43 (23%)
Academic attainm	ent			1		
Reading	87 [75, 101]	86 [71, 98]	0.128	18 (8%)	140 (60%)	48 (22%)
N = 215	(40, 140)	(40, 129)	0.128	10 (0%)	149 (69%)	48 (22%)
Spelling	88 [76, 100]	86 [74, 99]	0.465	21 (11%)	122 (600/)	38 (20%)
N = 192	(40, 134)	(40, 128)	0.403	21 (1170)	133 (69%)	30 (2070)
Numeracy	84 [67, 101]	78 [62, 96]	0.152	33 (17%)	103 (54%)	53 (28%)
N = 189	(42, 139)	(40, 143)	0.132	33 (1770)	103 (34/0)	33 (2070)

Only patients who had both pre- and postoperative assessment were included.

Abbreviations: FSIQ = Full-Scale IQ; IQR = interquartile range; Md = median.

Supplementary Table 10. Change in postoperative neuropsychological performance, from first to last postoperative assessment.

	First pos	toperative asse	ssment	Last post	operative assessi	ment		
	Age, years, Md [IQR] (range)	Duration of follow-up, years, Md [IQR] (range)	Score, Md [IQR] (range)	Age, years, Md [IQR] (range)	Duration of follow-up, years, Md [IQR] (range)	Score, Md [IQR] (range)	Change score, Md [IQR] (range)	р
IQ domains				I				
FSIQ	13.7 [10.1, 16.5]	1.3 [1.0, 1.6]	77 [62, 96]	17.9 [14.9, 23.9]	7.0 [4.4, 10.1]	84 [62, 98]	4 [-3, 11]	0.226
N = 76	(3.9, 20.5)	(0.0, 8.2)	(40, 127)	(7.5, 32.9)	(1.9, 15.7)	(40, 139)	(-16, 22)	0.336
Verbal IQ	12.9 [9.8, 16.3]	1.2 [1.0, 1.5]	81 [69, 96]	17.7 [14.5, 22.0]	6.0 [3.8, 9.4]	80 [70, 96]	3 [-4, 12]	0.500
N = 104	(3.9, 20.5)	(0.0, 5.0)	(40, 126)	(7.5, 32.9)	(1.3, 15.7)	(47, 138)	(-23, 28)	0.500
Performance IQ	13.0 [10.0, 16.4]	1.2 [1.0, 1.6]	88 [67, 106]	17.9 [14.5, 22.1]	6.2 [3.9, 9.4]	92 [71, 104]	2 [-4, 12]	0.246
N = 102	(4.3, 20.5)	(0.0, 7.1)	(40, 138)	(7.5, 32.9)	(1.3, 15.7)	(45, 135)	(-27, 36)	0.240
Working Memory	13.0 [9.9, 16.4]	1.3 [1.0, 2.0]	83 [68, 97]	17.5 [14.5, 21.0]	5.9 [3.9, 9.2]	86 [69, 99]	2 [-3, 9]	0.389
N = 84	(6.4, 20.5)	(0.2, 5.8)	(50, 124)	(9.0, 32.9)	(1.3, 15.7)	(50, 126)	(-37, 25)	0.389
Processing Speed	12.8 [9.4, 16.1]	1.2 [1.0, 2.0]	81 [70, 94]	17.2 [13.9, 20.6]	5.6 [3.8, 9.0]	84 [64, 97]	0 [-6, 6]	0.054
N = 85	(5.2, 21.4)	(0.2, 7.1)	(50, 137)	(7.5, 32.9)	(1.3, 15.7)	(49, 124)	(-45, 30)	0.854
Academic attainm	ent			1				
Reading	12.8 [9.9, 16.4]	1.2 [1.0, 2.0]	88 [71, 97]	16.8 [14.2, 21.3]	5.9 [3.8, 9.4]	84 [69, 105]	0 [-8, 8]	0.047
N = 89	(5.2, 21.8)	(0.0, 10.7)	(40, 143)	(7.5, 31.8)	(1.3, 15.4)	(40, 125)	(-46, 33)	0.947

Spelling	13.0 [9.9, 16.4]	1.2 [1.0, 2.0]	87 [71, 100]	17.1 [14.5, 21.5]	6.2 [3.9, 9.4]	92 [69, 103]	2 [-4, 9]	0.506
N = 80	(6.4, 21.8)	(0.0, 7.1)	(42, 128)	(9.0, 31.8)	(1.3, 15.4)	(40, 130)	(-63, 32)	0.306
Numeracy	13.0 [9.9, 16.4]	1.3 [1.0, 2.3]	78 [66, 101]	16.9 [14.2, 21.3]	6.0 [3.9, 9.4]	78 [64, 95]	-5 [-15, 3]	0.262
N = 81	(6.4, 21.8)	(0.0, 10.7)	(40, 139)	(9.0, 31.8)	(1.3, 15.4)	(40, 124)	(-34, 33)	0.202

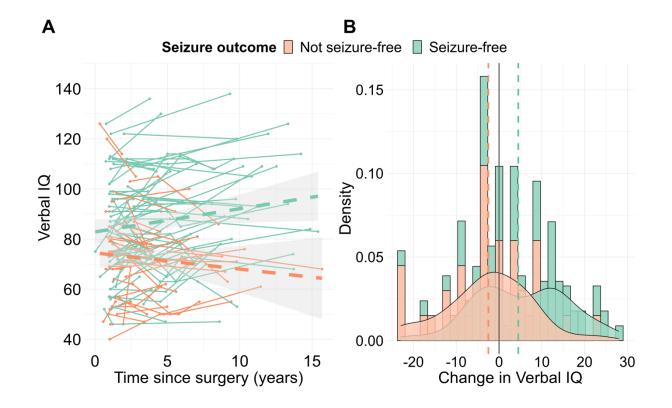
Abbreviations: FSIQ = Full-Scale IQ; IQR = interquartile range; Md = median.

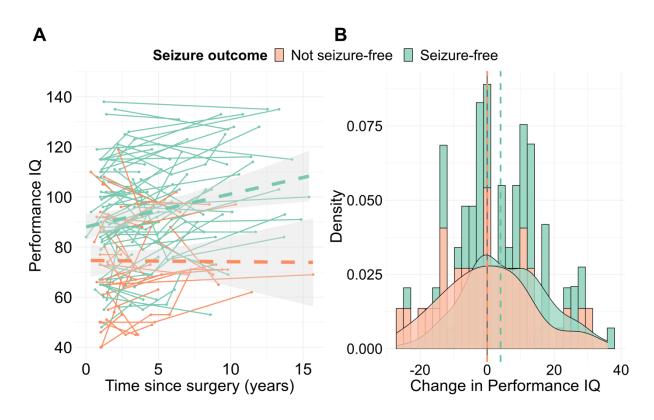
Supplementary Table 11. Mixed-effects linear regression analyses: postoperative neuropsychological changes in seizure-free versus not seizure-free patients.

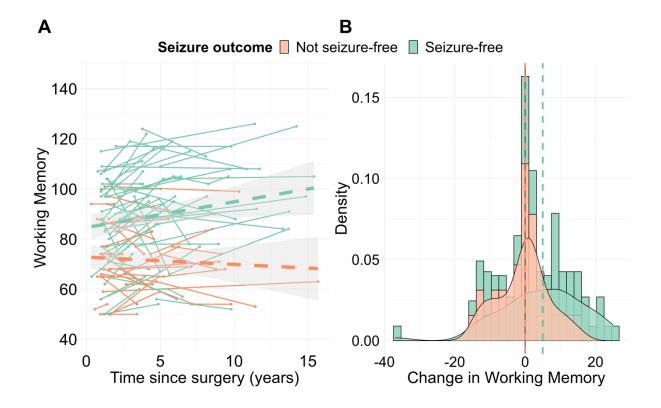
Model	β	SE	р
FSIQ			
Duration of follow-up	0.0	0.3	0.928
Seizure outcome: Seizure-free	14.1	2.9	<0.001 ***
Duration of follow-up * Seizure outcome: Seizure-free	0.9	0.3	0.004 **
Verbal IQ			
Duration of follow-up	-0.1	0.3	0.625
Seizure outcome: Seizure-free	6.9	2.3	0.003 **
Duration of follow-up * Seizure outcome: Seizure-free	1.0	0.3	0.003 **
Performance IQ			
Duration of follow-up	0.3	0.3	0.335
Seizure outcome: Seizure-free	10.3	2.6	<0.001 ***
Duration of follow-up * Seizure outcome: Seizure-free	0.7	0.4	0.093
Working Memory			
Duration of follow-up	-0.2	0.3	0.544
Seizure outcome: Seizure-free	10.3	2.5	<0.001 ***
Duration of follow-up * Seizure outcome: Seizure-free	1.0	0.4	0.010 *
Processing Speed			
Duration of follow-up	-0.6	0.4	0.131
Seizure outcome: Seizure-free	7.5	2.7	0.006 **
Duration of follow-up * Seizure outcome: Seizure-free	0.8	0.5	0.068
Reading			
Duration of follow-up	-1.2	0.5	0.015 *
Seizure outcome: Seizure-free	4.6	2.9	0.117
Duration of follow-up * Seizure outcome: Seizure-free	1.6	0.5	0.002 **
Spelling			
Duration of follow-up	-0.1	0.5	0.850
Seizure outcome: Seizure-free	7.3	3.0	0.014 *
Duration of follow-up * Seizure outcome: Seizure-free	0.6	0.5	0.220
Numeracy			
Duration of follow-up	-0.5	0.5	0.382
Seizure outcome: Seizure-free	13.9	3.2	<0.001 ***
Duration of follow-up * Seizure outcome: Seizure-free	-0.6	0.6	0.268
411 '.' OF . 1 1			

Abbreviations: SE = standard error.

<sup>\*</sup>p <0.05 \*\*p <0.01 \*\*\*p <0.001

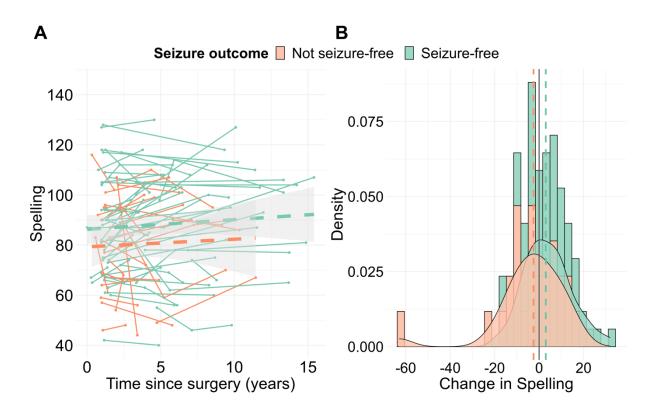








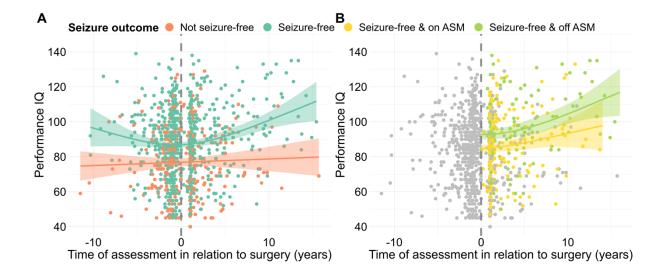




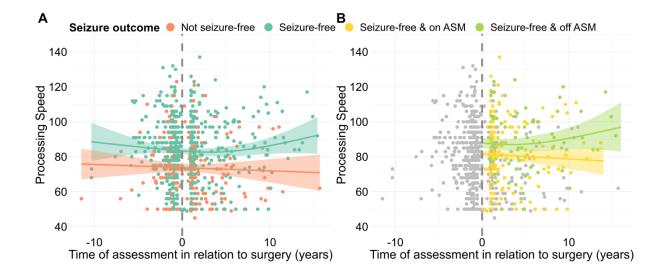


Supplementary Fig. 3. Postoperative changes in neuropsychological performance (A) Longitudinal postoperative trajectories in Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy in seizure-free (green) versus not seizure-free (orange) patients. Only patients with two or more postoperative assessments were included. All postoperative assessments were included for each patient. Linear modelling was fitted to all data points, according to seizure outcome (dotted green lines for patients who were seizure-free and dotted orange lines for patients who were not seizure-free); shaded areas represent the 95% confidence intervals. (B) Individual change in postoperative Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy in seizure-free (green) versus not seizure-free (orange) patients. The distribution of change scores is represented using a density plot. The change score for each patient was computed by subtracting the patient's first postoperative score from their last postoperative score. The median change scores are displayed with green dashed lines (in seizure-free patients) and with orange dashed lines (in not seizure-free patients). Only patients with two or more postoperative assessments were included in the visualisation.











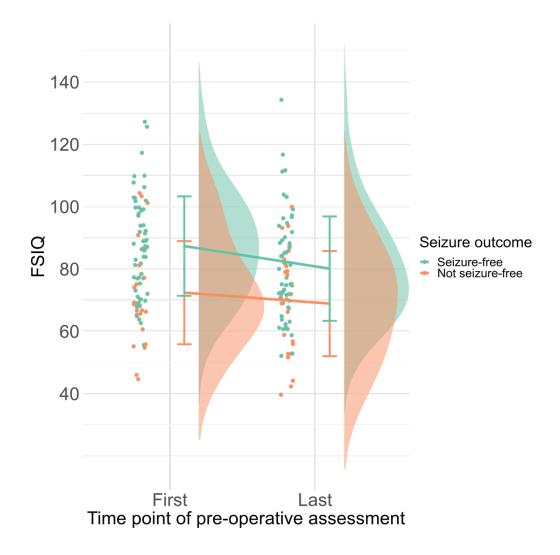




## Supplementary Fig. 4. Pre- to postoperative changes in neuropsychological performance

(A) Pre- and postoperative trajectories in Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy in seizure-free (green) versus not seizurefree (orange) patients. All patients were included in the visualisation, irrespective of whether they had one or multiple pre- and/or postoperative assessments. If patients had multiple preand/or postoperative assessments, all assessments were included for each patient. Generalised additive modelling was fitted to all data points, according to seizure outcome (solid green lines for patients who were seizure-free and solid orange lines for patients who were not seizurefree); shaded areas represent the 95% confidence intervals. (B) Pre- and postoperative trajectories in Verbal IQ, Performance IQ, Working Memory, Processing Speed, Reading, Spelling, and Numeracy in seizure-free patients who were still receiving ASMs (yellow) versus no longer receiving ASMs (light green). Grey points represent performance in the preoperative period as well as performance for patients who did not become seizure-free postoperatively. All patients were included in the visualisation, irrespective of whether they had one or multiple pre- and/or postoperative assessments. If patients had multiple pre- and/or postoperative assessments, all assessments were included for each patient. Generalised additive modelling was fitted to all data points, according to postoperative ASM status (solid yellow lines for patients who were still receiving ASMs and solid light green for patients who were no longer receiving ASMs); shaded areas represent the 95% confidence intervals.

Abbreviations: ASM = antiseizure medication.



**Supplementary Fig. 5.** Raincloud plots show the raw data and density functions for FSIQ at first and last preoperative assessment. The lines adjacent to the density functions show the mean and standard error for the groups (connected between the two time points with hashed lines). Only patients with multiple preoperative assessments were included. Patients who became seizure-free postoperatively performed significantly better at both first and last preoperative assessment compared to those patients who did not become seizure-free. Patients also showed higher performance on their first preoperative assessment compared to their last preoperative assessment.

Abbreviations: FSIQ = Full-Scale IQ.

**Supplementary Table 12.** Two-way ANOVAs investigating the possible interaction effects between time point of preoperative assessment and seizure outcome in patients with multiple preoperative assessments.

	Main effect – time point of preoperative assessment	Main effect – seizure outcome	Interaction effect between time point of preoperative assessment and seizure outcome
IQ domains			
FSIQ	p = 0.019	p < 0.001	F(1,158) = 0.4, p = 0.511
Verbal IQ	p = 0.007	p < 0.001	F(1,234) = 0.3, p = 0.602
Performance IQ	p = 0.276	p < 0.001	F(1,228) = 0.7, p = 0.414
Working Memory	p = 0.101	p = 0.278	F(1,222) = 0.0, p = 0.830
<b>Processing Speed</b>	p = 0.011	p < 0.001	F(1,128) = 0.2, p = 0.660
Academic attainm	ient		
Reading	p = 0.067	p < 0.001	F(1,134) = 0.1, p = 0.735
Spelling	p = 0.370	p = 0.135	F(1,116) = 0.0, p = 0.955
Numeracy	p = 0.048	p = 0.200	F(1,102) = 0.1, p = 0.751

Abbreviations: FSIQ = Full-Scale IQ.

**Supplementary Table 13.** Comparison of seizure-free versus not seizure-free patients, with preoperative neuropsychological data.

	nological data.
Sex	ns
Handedness	ns
Educational status	ns
Preoperative FSIQ	ns
Family history of epilepsy	ns
Genetic diagnosis of epilepsy	ns
concine unignosis of opinopsy	**
Age of epilepsy onset	Seizure-free patients had an older age of epilepsy onset;  Md <sub>seizure-free</sub> = 4.0, IQR <sub>seizure-free</sub> = (2.0, 7.6) versus Md <sub>not seizure-free</sub> = 2.9, IQR <sub>not seizure-free</sub> = (2.0, 5.5)
Age at surgery	ns
Duration of epilepsy	ns
History of infantile spasms	ns
Spasms at time of preoperative evaluation	ns
History of GTC seizures	ns
Number of seizure types at	
preoperative assessment	ns
Number of ASMs at preoperative	
assessment	ns
assessment	**
Total number of ASMs trialled from epilepsy onset to preoperative evaluation	Seizure-free patients had trialled a fewer number of different ASMs over the course of their epilepsy;  Mseizure-free = 4.4, SDseizure-free = 2.2 versus  Mnot seizure-free = 5.5, SDnot seizure-free = 2.5
MRI laterality	ns
Type of MRI abnormality	*** Patients who were not seizure-free were more likely to have non-focal (diffuse or multifocal) MRI abnormalities or be MRI negative
Procedure type	ns
Side operated on	ns
Lobe operated on	ns
-	***
Histopathology	Patients who were not seizure-free were more likely to have a diagnosis of MCD-Other, Tuberous sclerosis, Vascular aetiology, and Non-specific epilepsy-associated changes.
Postoperative ASM status	*** Patients who were seizure-free were more likely to be off ASMs postoperatively.

p-values were obtained following correction for multiple comparison using the Holm method.

Abbreviations: ASM = antiseizure medication; FCD-II = focal cortical dysplasia type II; FSIQ = Full-Scale IQ; GTC = generalised tonic-clonic seizures; ns = not significant.

<sup>\*</sup>p <0.05 \*\*p <0.01

<sup>\*\*\*</sup>p < 0.001

Supplementary Table 14. Relationships between patient characteristics and neuropsychological functioning at different time points.

	-	erative tra	•		Performance at pre- ative assessment  Performance at post-operative assessment			ve	pos	mance a t-operati	ve	pos	from pre st-operati ssessmen	ve	po a	e from pr ost-opera assessme		_	erative tr	•	
	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ
Right-handed (versus Left-handed/ Ambidextrous/ Handedness not established)	-0.13	-0.05	0.03	0.19	0.16	0.18	0.21	0.13	0.14	0.13	0.10	0.10	-0.07	0.04	0.05	-0.06	0.05	-0.03	-0.29	-0.03	-0.23
Mainstream school																					
(versus Mainstream school with support /SEN/ Not attending school/ Not of school age)	0.32	0.14	0.25	0.60 h ***	0.54 h ***	0.56 h ***	0.58 h ***	0.58 h ***	0.55 h ***	0.58 h ***	0.54 h ***	0.52 h ***	0.00	0.00	-0.06	0.00	-0.03	-0.10	-0.06	0.21	-0.23
-	-0.26	-0.19	-0.25				0.86	0.84	0.82	0.82	0.80	0.78	-0.21	-0.34	-0.17	-0.15	-0.33	-0.22	0.03	-0.09	-0.21
Initial performance a	*	*	**	-	-	-	h ***	**	h ***	**		h ***	h ***								
Family history of epilepsy (versus No family history of epilepsy)	0.08	0.02	-0.06	0.10	0.08	0.09	0.02	-0.04	0.01	0.07	-0.06	0.02	0.06	-0.11	-0.09	-0.02	-0.15 *	-0.10	-0.03	-0.10	0.06
Genetic diagnosis of epilepsy (versus No genetic diagnosis)	n	n	n	-0.21	-0.24	-0.41	-0.08	-0.12	-0.15	-0.22	-0.28	-0.32	-0.06	-0.21	-0.44	-0.15	-0.30	-0.48	n	n	n
Age of epilepsy onset (1) No covariate	(1) -0.15	(1) -0.07	(1) 0.08	(1) 0.26 h ***	(1) 0.22 h ***	(1) 0.26 h ***	(1) 0.30 h ***	(1) 0.24 h ***	(1) 0.28 h ***	(1) 0.29 h ***	(1) 0.25 h ***	(1) 0.27 h ***	(1) 0.04	(1) 0.04	(1) -0.01	(1) 0.06	(1) 0.05	(1) -0.01	(1) 0.18	(1) 0.02	(1) 0.16
(2) Controlling for Age at surgery	(2) -0.26 *	-0.17	-0.01	(2) 0.30 h ***	(2) 0.24 h ***	(2) 0.25 h ***	(2) 0.26 h ***	(2) 0.21 h ***	(2) 0.23 h ***	(2) 0.23 h ***	(2) 0.21 h ***	(2) 0.21 h ***	-0.10	-0.04	(2) -0.07	(2) -0.07	(2) -0.04	(2) -0.09	(2) 0.25	(2) 0.10	(2) 0.12
(3) Controlling for Duration of epilepsy	(3) 0.00	(3) 0.07	(3) 0.18	(3) 0.13 *	(3) 0.12 *	(3) 0.20 h ***	(3) 0.27 h ***	(3) 0.19 h ***	(3) 0.25 h ***	(3) 0.27 h ***	(3) 0.22 h ***	(3) 0.27 h ***	(3) 0.26 **	(3) 0.12	(3) 0.09	(3) 0.30 ***	(3) 0.14 *	(3) 0.14 *	(3) 0.10	(3) -0.06	(3) 0.20

	_	erative tra	•	ge operative assessment		Performance at first post-operative assessment			pos	mance a t-operati	ve	_	from pre st-operat ssessmen	ive	po	e from pr ost-opera assessme		_	erative tr	•	
	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ
Age at surgery (1) No covariate (2) Controlling for Age of epilepsy onset (3) Controlling for Duration of epilepsy	(1) 0.18 (2) 0.27 * (3) 0.04	(1) 0.19 * (2) 0.24 ** (3) 0.10	(1) 0.22 * (2) 0.21 * (3) 0.18	(1) 0.06 (2) -0.18 ** (3) 0.14	(1) -0.03 (2) -0.10 * (3) 0.15 **	(1) 0.08 (2) 0.00 (3) 0.21 h***	(1) 0.17 * (2) 0.04 (3) 0.34 h***	(1) 0.11 * (2) 0.00 (3) 0.27 h***	(1) 0.18 ** (2) 0.08 (3) 0.29 h ***	(1) 0.21 ** (2) 0.10  (3) 0.34 h ***	(1) 0.14 ** (2) 0.04 (3) 0.28 h ***	(1) 0.22 h*** (2) 0.14 * (3) 0.31 h***	(1) 0.36 h*** (2) 0.36 h*** (3) 0.23 **	(1) 0.19 ** (2) 0.19 ** (3) 0.14	(1) 0.14 * (2) 0.16 ** (3) 0.07	(1) 0.40 h*** (2) 0.39 h*** (3) 0.27 h***	(1) 0.21 h*** (2) 0.21 h*** (3) 0.16 **	(1) 0.22 h*** (2) 0.23 h*** (3) 0.12 *	(1) -0.18 (2) -0.25 (3) 0.02	(1) -0.25 (2) -0.26 (3) -0.18	(1) 0.19 (2) 0.15 (3) 0.21
Duration of epilepsy <sup>b</sup> (1) No covariate (2) Controlling for Age of epilepsy onset (3) Controlling for Age at surgery	(1) 0.31 ** (2) 0.27 * (3) 0.26 *	(1) 0.23 * (2) 0.23 * (3) 0.17	(1) 0.13 (2) 0.21 * (3) 0.03	(1) -0.31 h *** (2) -0.23 h *** (3) -0.34 h ***	(1) -0.25 h *** (2) -0.17 h *** (3) -0.29 h ***	(1) -0.17 h*** (2) -0.05 (3) -0.25 h***	(1) -0.16 * (2) -0.06 (3) -0.33 h***	(1) -0.18 ** (2) -0.11 * (3) -0.30 h***	(1) -0.13 * (2) 0.02 (3) -0.26 h***	(1) -0.11 (2) 0.00 (3) -0.30 h***	(1) -0.13 * (2) -0.05 (3) -0.27 h***	(1) -0.07 (2) 0.08 (3) -0.23 h***	(1) 0.33 h*** (2) 0.41 h*** (3) 0.17	(1) 0.13 * (2) 0.17 ** (3) 0.05	(1) 0.16 ** (2) 0.18 ** (3) 0.10	(1) 0.33 h*** (2) 0.43 h*** (3) 0.15	(1) 0.16 ** (2) 0.21 h*** (3) 0.05	(1) 0.22 h *** (2) 0.26 h *** (3) 0.14 *	(1) -0.26 (2) -0.22 (3) -0.20	(1) -0.17 (2) -0.18 (3) -0.01	(1) 0.04 (2) 0.13 (3) -0.11
History of infantile spasms (versus No history of infantile spasms)	n	n	n	-0.19	-0.23	-0.24	-0.21	-0.19	-0.21	-0.20	-0.20	-0.21	-0.15	0.00	-0.08	-0.16	-0.02	-0.11	n	n	N
Spasms at time of pre-operative evaluation (versus No spasms at time of pre- operative evaluation)	n	n	n	-0.26	-0.29 **	-0.29	-0.15	-0.15	-0.26	-0.13	-0.15	-0.25	-0.35	-0.23	-0.08	-0.31	-0.13	0.02	n	n	n
History of GTC seizures	-0.27 *	-0.19	-0.36 h **	-0.11	-0.11	-0.11	-0.14	-0.13	-0.08	-0.11	-0.12	-0.05	-0.07	-0.09	0.00	-0.08	-0.11	0.04	0.01	-0.03	0.17

	_	erative tra	•		rmance a		Performance at first post-operative assessment		pos	rmance a t-operati	ve	_	from pre st-operati ssessmen	ive	po	e from pr ost-opera assessme	tive	_	erative tr		
	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ
Three or more seizure types at time of pre- operative evaluation (versus two or fewer seizure types)	0.06	0.02	-0.03	-0.26 *	-0.18 *	-0.22 **	-0.27	-0.16	-0.13	-0.20	-0.13	-0.08	-0.09	-0.14	-0.05	-0.06	-0.19	-0.01	-0.38	-0.07	n
Number of ASMs at pre-operative assessment	-0.14	-0.19 *	-0.11	-0.26 h ***	-0.19 h ***	-0.28 h ***	-0.35 h ***	-0.27 h ***	-0.33 h ***	-0.36 h ***	-0.29 h ***	-0.32 h ***	-0.12	-0.12	-0.19 h **	-0.15	-0.12 *	-0.16 **	-0.23	-0.01	0.08
Total number of ASMs trialled from epilepsy onset to pre- operative evaluation	0.02	-0.05	-0.15	-0.35 h ***	-0.29 h ***	-0.36 h ***	-0.36 h ***	-0.28 h ***	-0.37 h ***	-0.35 h ***	-0.28 h ***	-0.33 h ***	-0.03	-0.04	-0.15 *	0.00	-0.04	-0.09	-0.05	0.07	0.17
Bilateral MRI abnormalities (versus unilateral MRI abnormalities)	-0.06	-0.19	-0.06	-0.21	-0.15	-0.18 *	-0.28 *	-0.16	-0.18	-0.35	-0.21	-0.24 *	-0.11	-0.23	-0.14	-0.17	-0.31	-0.24	n	n	n
Focal MRI abnormalities (versus Diffuse/Multifocal/Ne gative)	0.14	0.11	0.19	0.38 h ***	0.27 h ***	0.34 h ***	0.42 h ***	0.31 h ***	0.42 h ***	0.45 h ***	0.33 h ***	0.44 h ***	0.03	0.08	0.13	0.08	0.11	0.15	0.17	0.03	0.02
Lesionectomy/ Lobectomy (versus Hemispherotomy/ Disconnection/ Corpus callosotomy)	-	-	-	-	-	-	0.52 h ***	0.40 h ***	0.55 h ***	0.53 h ***	0.42 h ***	0.59 h ***	0.02	0.02	0.19	0.13	0.06	0.21	0.38	0.37	0.51 h ***
Right-sided surgery (versus Left-sided surgery)	-	-	-	-	-	-	-0.04	0.05	-0.12	-0.10	0.01	-0.20 h **	0.00	-0.03	0.00	-0.11	-0.09	-0.07	-0.14	-0.19	-0.19

	•	– relative rate of change		Performance at pre- operative assessment			Performance at first  post-operative  assessment			pos	mance a t-operati	ve	•	from pre st-operat ssessmen	ive	po	e from pr ost-opera assessme		_	erative tr	
	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ	FSIQ	VIQ	PIQ
Multilobar surgery (versus Unilobar surgery)	-	-	-	-	-	-	-0.19	-0.29 *	-0.33	-0.35	-0.36 h **	-0.38 h **	-0.02	-0.13	-0.01	-0.16	-0.21	-0.09	n	n	n
Aetiology: LEAT	-0.14	0.00	0.07	0.36 h ***	0.25 h ***	0.28 h ***	0.35 h ***	0.24 h **	0.31 h ***	0.35 h ***	0.26 h ***	0.27 h ***	0.06	0.16	0.14	0.03	0.15	0.04	0.02	0.11	-0.06
Aetiology: MTS	0.01	0.02	-0.01	-0.10	-0.15 *	-0.03	-0.03	-0.15	-0.07	0.04	-0.09	0.07	0.03	0.00	0.00	0.23	0.06	0.20	0.33	-0.05	0.14
Aetiology: FCD-II	0.29	0.28	0.02	-0.03	0.04	-0.01	-0.11	0.03	0.03	0.10	0.00	0.00	0.03	-0.05	0.09	-0.08	-0.04	0.06	n	0.22	n
Aetiology: Rasmussen encephalitis	n	-0.43	-0.37	-0.41 **	-0.28	-0.45 h **	-0.55 *	-0.32	-0.68 h ***	-0.58 **	-0.29 *	-0.66 h ***	-0.28	-0.01	-0.56 h ***	-0.35	0.12	-0.39 *	n	n	n
Seizure-free (versus Not seizure-free) <sup>c</sup>	-	-	-	-	-	-	0.37 h ***	0.24 h ***	0.27 h ***	0.47 h ***	0.32 h ***	0.34 h ***	0.12	0.09	0.13	0.33 h ***	0.24 h **	0.23	0.44 h **	0.36 h **	0.21
Off ASM (versus Receiving ASM/ Weaning ASM)	-	-	-	-	-	-	0.32	0.25	0.27	0.32	0.25	0.25	-0.12	-0.06	0.08	0.08	0.01	0.04	n	-0.06	-0.11

Associations between demographic, clinical and surgical variables and neuropsychological functioning were investigated using Pearson's correlation coefficient, Spearman's rank correlation coefficient, and rank-biserial correlation coefficient, as appropriate. Age of epilepsy onset, age at surgery, and duration of epilepsy were analysed separately, using partial correlations, to take into account the intercorrelated nature between these clinical characteristics.

Abbreviations: ASM = antiseizure medication; FCD-II = focal cortical dysplasia type II; FSIQ = Full-Scale IQ; GTC = generalised tonic-clonic; LEAT = low-grade epilepsy-associated tumour; MTS = mesial temporal sclerosis; PIQ = Performance IQ; SEN = special educational needs; VIQ = Verbal IQ.

p-values were obtained prior to correction for multiple comparison using the Holm method, which was then applied sequentially to each column.  $^h$  Denotes if the p-value survived correction for multiple comparison. n = analysis not performed due to the comparison group having a sample size smaller than N = 10.

<sup>&</sup>lt;sup>a</sup> For preoperative trajectory, this was the first assessment patients had had. For postoperative performance, this was the preoperative assessment closest to surgery (the last preoperative assessment). For postoperative trajectory, this was the postoperative performance closest to surgery (first postoperative assessment).

<sup>&</sup>lt;sup>b</sup> For preoperative neuropsychology assessment, duration of epilepsy was calculated from time of epilepsy onset to time of neuropsychology assessment. For postoperative neuropsychology assessment, duration of epilepsy was calculated from time of epilepsy onset to time of surgery.

<sup>&</sup>lt;sup>c</sup> For postoperative assessment, this was seizure outcome at one-year follow-up. For postoperative trajectories, this was seizure outcome at last follow-up.

<sup>\*</sup>p < 0.05

<sup>\*\*</sup>p < 0.01

<sup>\*\*\*</sup>p < 0.001

**Supplementary Table 15**. Neuropsychological functioning at first postoperative assessment in seizure-free patients not receiving ASMs versus receiving/weaning ASMs.

-	Off ASM	On ASM/Weaning	
	Score, Md [IQR]	Score, Md [IQR]	_
	(range)	(range)	p
IQ domains			
FSIQ	0-5-4 4007	<b>7</b> 0.566.043	
N = 148  (Off ASM = 27; On	87 [74, 100]	78 [66, 91]	0.057
ASM/Weaning = 121)	(49, 130)	(43, 122)	
Verbal IQ	01 [71 00]	00 [(7, 0/]	
N = 225 (Off ASM = 42; On	91 [71, 98]	80 [67, 96]	0.068
ASM/Weaning = 183)	(50, 130)	(45, 126)	
Performance IQ	02 [02 105]	07.170.1001	
N = 205 (Off ASM = 35; On	93 [82, 105]	86 [72, 100]	0.051
ASM/Weaning = 170)	(50, 127)	(40, 133)	
Working Memory			
N = 183  (Off ASM = 36; On	91 [78, 102]	83 [68, 97]	0.026
ASM/Weaning = 147)	(56, 124)	(50, 136)	*
Processing Speed			
N = 177  (Off ASM = 34; On	88 [78, 102]	80 [68, 91]	0.012
ASM/Weaning = 143)	(50, 123)	(49, 121)	*
Academic attainment			
Reading	93 [75, 103]	3 [75, 103] 85 [69, 97]	
N = 191  (Off ASM = 30; On	(45, 121)	(40, 129)	0.158
ASM/Weaning = 161)	( , ,	( ', ', ',	
Spelling	90 [76, 105]	86 [73, 98]	
N = 178  (Off ASM = 29; On	(54, 118)	(40, 128)	0.181
ASM/Weaning = 149)		(.0, 120)	
Numeracy	94 [75, 106]	81 [65, 93]	0.028
N = 178  (Off ASM = 29; On	(56, 134)	(40, 139)	*
ASM/Weaning = 149)	<i>、,,</i>	· /	

Abbreviations: ASM = antiseizure medication; FSIQ = Full-Scale IQ.

<sup>\*</sup>p < 0.05

<sup>\*\*</sup>p < 0.01

<sup>\*\*\*</sup>p <0.001

**Supplementary Table 16**. Postoperative neuropsychological trajectories in seizure-free patients who were no longer receiving ASMs versus receiving or weaning ASMs.

	Off ASM	On ASM/Weaning	p
IQ domains			
FSIQ  N = 47 (Off ASM = 30; On  ASM/Weaning = 17)	1.8 [0.3, 2.2] (-1.1, 8.6)	1.2 [-0.6, 2.2] (-2.4, 3.5)	0.211
Verbal IQ  N = 63 (Off ASM = 39; On  ASM/Weaning = 24)	1.3 [0.0, 3.1] (-2.7, 7.0)	-0.1 [-1.4, 2.0] (-9.6, 5.4)	0.026
Performance IQ  N = 65 (Off ASM = 40; On  ASM/Weaning = 25)	1.3 [-0.2, 2.7] (-2.0, 10.6)	0.0 [-2.0, 2.6] (-6.1, 6.1)	0.205
Working Memory  N = 51 (Off ASM = 30; On  ASM/Weaning = 21)	1.4 [0.7, 2.9] (-10.4, 9.0)	0.0 [-1.8, 1.9] (-4.1, 4.8)	0.032
Processing Speed  N = 50 (Off ASM = 28; On  ASM/Weaning = 22)	0.7 [-0.1, 2.3] (-4.3, 10.0)	0.0 [-1.7, 2.0] (-5.5, 6.4)	0.214
Academic attainment			
Reading  N = 50 (Off ASM = 28; On  ASM/Weaning = 22)	0.9 [-0.2, 2.2] (-1.1, 10.5)	-0.7 [-2.5, 1.9] (-6.8, 4.7)	0.034
Spelling  N = 52 (Off ASM = 32; On  ASM/Weaning = 20)	1.0 [-0.1, 2.4] (-2.1, 7.8)	-0.3 [-1.7, 1.5] (-5.7, 5.0)	0.026
Numeracy $N = 53 \text{ (Off ASM} = 32; \text{ On}$ $ASM/Weaning = 21)$	-1.1 [-1.9, 0.7] (-8.3, 5.6)	-2.6 [-4.1, 0.4] (-19.0, 7.5)	0.200

Abbreviations: ASM = antiseizure medication; FSIQ = Full-Scale IQ.

<sup>\*</sup>p <0.05

<sup>\*\*</sup>p <0.01

<sup>\*\*\*</sup>p <0.001