

**Studies on neuroimaging changes during/after status epilepticus included in the review (see Methods – Literature Review). In none claustrum lesions are reported.**

- e1. Al-Jafen BN, Alanazy MH, Scott JN, Pillay N. Magnetic resonance imaging of crossed cerebellar diaschisis and bright pulvinar in status epilepticus. *Neurosciences (Riyadh)* 2012;17:259-261.
- e2. Amato C, Elia M, Musumeci SA, Bisceglie P, Moschini M. Transient MRI abnormalities associated with partial status epilepticus: a case report. *European journal of radiology* 2001;38:50-54.
- e3. Arman F, Kaya D, Dincer A, Sav A, Pamir MN. Serial EEG and MRI changes in status epilepticus-induced excitotoxic neuronal necrosis. *Epileptic disorders : international epilepsy journal with videotape* 2011;13:446-451.
- e4. Bauer G, Gotwald T, Dobesberger J, et al. Transient and permanent magnetic resonance imaging abnormalities after complex partial status epilepticus. *Epilepsy & behavior : E&B* 2006;8:666-671.
- e5. Boyd JG, Taylor S, Rossiter JP, Islam O, Spiller A, Brunet DG. New-onset refractory status epilepticus with restricted DWI and neuronophagia in the pulvinar. *Neurology* 2010;74:1003-1005.
- e6. Buracchio T, Lewis SL, Jhaveri M, Bergen D. Restricted diffusion on magnetic resonance imaging in partial status epilepticus. *Archives of neurology* 2008;65:278-279.
- e7. Calistri V, Caramia F, Bianco F, Fattapposta F, Pauri F, Bozzao L. Visualization of evolving status epilepticus with diffusion and perfusion MR imaging. *AJNR American journal of neuroradiology* 2003;24:671-673.
- e8. Callahan DJ, Noetzel MJ. Prolonged absence status epilepticus associated with carbamazepine therapy, increased intracranial pressure, and transient MRI abnormalities. *Neurology* 1992;42:2198-2201.
- e9. Canas N, Soares P, Calado S, Pestana R, Ribeiro C, Vale J. Pathophysiology and long-term outcome of reversible tumor-like lesions induced by presenting status epilepticus. *Journal of neuroimaging : official journal of the American Society of Neuroimaging* 2010;20:169-174.
- e10. Chatzikonstantinou A, Gass A, Forster A, Hennerici MG, Szabo K. Features of acute DWI abnormalities related to status epilepticus. *Epilepsy research* 2011;97:45-51.
- e11. Chu K, Kang DW, Kim JY, Chang KH, Lee SK. Diffusion-weighted magnetic resonance imaging in nonconvulsive status epilepticus. *Archives of neurology* 2001;58:993-998.
- e12. Cianfoni A, Caulo M, Cerase A, et al. Seizure-induced brain lesions: A wide spectrum of variably reversible MRI abnormalities. *European journal of radiology* 2013.
- e13. Dafotakis M, Sparing R, Becker S, Fink GR. Epilepsia partialis continua of the abdominal muscles with transient MRI abnormalities. *Neurology* 2006;66:1099.
- e14. De Carolis P, Crisci M, Laudadio S, Baldrati A, Sacquegna T. Transient abnormalities on magnetic resonance imaging after partial status epilepticus. *Italian journal of neurological sciences* 1992;13:267-269.
- e15. Di Bonaventura C, Mari F, Pierallini A, et al. Status epilepticus in a patient with fragile X syndrome: electro-clinical features and peri-ictal neuroimaging. *Epileptic disorders: international epilepsy journal with videotape* 2006;8:195-199.
- e16. Doherty CP, Cole AJ, Grant PE, et al. Multimodal longitudinal imaging of focal status epilepticus. *The Canadian journal of neurological sciences Le journal canadien des sciences neurologiques* 2004;31:276-281.
- e17. Donaire A, Carreno M, Gomez B, et al. Cortical laminar necrosis related to prolonged focal status epilepticus. *Journal of neurology, neurosurgery, and psychiatry* 2006;77: 104-106.
- e18. Fazekas F, Kapeller P, Schmidt R, et al. Magnetic resonance imaging and spectroscopy findings after focal status epilepticus. *Epilepsia* 1995;36:946-949.

- e19. Flacke S, Wullner U, Keller E, Hamzei F, Urbach H. Reversible changes in echo planar perfusion- and diffusion-weighted MRI in status epilepticus. *Neuroradiology* 2000;42:92-95.
- e20. Fujita K, Izumi Y, Harada M, Kaji R. Crossed cerebellar hyperperfusion without restricted diffusion in status epilepticus. *Journal of neurology* 2013;260:674-676.
- e21. Goyal MK, Sinha S, Ravishankar S, Shivshankar JJ. Peri-ictal signal changes in seven patients with status epilepticus: interesting MRI observations. *Neuroradiology* 2009;51:151-161.
- e22. Grommes C, Oghlakian R, Blackham KA, De Georgia MA. Corpus callosum dysgenesis limits MRI changes to one hemisphere in status epilepticus. *Neurology* 2009;72:942.
- e23. Henry TR, Drury I, Brunberg JA, Pennell PB, McKeever PE, Beydoun A. Focal cerebral magnetic resonance changes associated with partial status epilepticus. *Epilepsia* 1994;35:35-41.
- e24. Hisano T, Ohno M, Egawa T, Takano T, Shimada M. Changes in diffusion-weighted MRI after status epilepticus. *Pediatric neurology* 2000;22:327-329.
- e25. Hong KS, Cho YJ, Lee SK, Jeong SW, Kim WK, Oh EJ. Diffusion changes suggesting predominant vasogenic oedema during partial status epilepticus. *Seizure: the journal of the British Epilepsy Association* 2004;13:317-321.
- e26. Huang YC, Weng HH, Tsai YT, et al. Periictal magnetic resonance imaging in status epilepticus. *Epilepsy research* 2009;86:72-81.
- e27. Juhasz C, Scheidl E, Szirmai I. Reversible focal MRI abnormalities due to status epilepticus. An EEG, single photon emission computed tomography, transcranial Doppler follow-up study. *Electroencephalography and clinical neurophysiology* 1998;107:402-407.
- e28. Katramados AM, Burdette D, Patel SC, Schultz LR, Gaddam S, Mitsias PD. Periictal diffusion abnormalities of the thalamus in partial status epilepticus. *Epilepsia* 2009;50:265-275.
- e29. Kavuk I, Koeppen S, Agelink M, Dorfler A, Limmroth V, Diener HC. Transient MRI abnormalities associated with partial status epilepticus. *Journal of neurology* 2004;251:1156-1157.
- e30. Kim JA, Chung JI, Yoon PH, et al. Transient MR signal changes in patients with generalized tonicoclonic seizure or status epilepticus: periictal diffusion-weighted imaging. *AJNR American journal of neuroradiology* 2001;22:1149-1160.
- e31. Korngut L, Young GB, Lee DH, Hayman-Abello BA, Mirsattari SM. Irreversible brain injury following status epilepticus. *Epilepsy & behavior : E&B* 2007;11:235-240.
- e32. Kramer RE, Luders H, Lesser RP, et al. Transient focal abnormalities of neuroimaging studies during focal status epilepticus. *Epilepsia* 1987;28:528-532.
- e33. Kumpfel T, Lechner C, Auer D, Kraft E, Lydtin H, Trenkwalder C. Non-convulsive status epilepticus with marked neuropsychiatric manifestations and MRI changes after treatment of hypercalcaemia. *Acta neurologica Scandinavica* 2000;102:337-339.
- e34. Lansberg MG, O'Brien MW, Norbash AM, Moseley ME, Morrell M, Albers GW. MRI abnormalities associated with partial status epilepticus. *Neurology* 1999;52:1021-1027.
- e35. Malik SI, Hernandez AW. Peri-ictal imaging in focal status epilepticus. *Pediatric neurology* 2011;45:138-139.
- e36. Meierkord H, Wiesmann U, Niehaus L, Lehmann R. Structural consequences of status epilepticus demonstrated with serial magnetic resonance imaging. *Acta neurologica Scandinavica* 1997;96:127-132.
- e37. Men S, Lee DH, Barron JR, Munoz DG. Selective neuronal necrosis associated with status epilepticus: MR findings. *AJNR American journal of neuroradiology* 2000;21:1837-1840.
- e38. Milligan TA, Zamani A, Bromfield E. Frequency and patterns of MRI abnormalities due to status epilepticus. *Seizure : the journal of the British Epilepsy Association* 2009;18:104-108.
- e39. Ohe Y, Hayashi T, Deguchi I, et al. A case of nonconvulsive status epilepticus with a reversible contralateral cerebellar lesion: temporal changes in magnetic resonance imaging

and single-photon emission computed tomography finding. *Journal of stroke and cerebrovascular diseases : the official journal of National Stroke Association* 2013;22:e639-642.

- e40. Ohe Y, Hayashi T, Deguchi I, et al. MRI abnormality of the pulvinar in patients with status epilepticus. *Journal of neuroradiology Journal de neuroradiologie* 2014.
- e41. Pohlmann-Eden B, Gass A, Peters CN, Wennberg R, Blumcke I. Evolution of MRI changes and development of bilateral hippocampal sclerosis during long lasting generalised status epilepticus. *Journal of neurology, neurosurgery, and psychiatry* 2004;75:898-900.
- e42. Riela AR, Sires BP, Penry JK. Transient magnetic resonance imaging abnormalities during partial status epilepticus. *Journal of child neurology* 1991;6:143-145.
- e43. Samaniego EA, Stuckert E, Fischbein N, Wijman CA. Crossed cerebellar diaschisis in status epilepticus. *Neurocritical care* 2010;12:88-90.
- e44. Senn P, Lovblad KO, Zutter D, et al. Changes on diffusion-weighted MRI with focal motor status epilepticus: case report. *Neuroradiology* 2003;45:246-249.
- e45. Sirven JI, Zimmerman RS, Carter JL, Drazkowski JF, Larson JS. MRI changes in status epilepticus. *Neurology* 2003;60:1866.
- e46. Stone JL, Hughes JR, Barr A, Tan W, Russell E, Crowell RM. Neuroradiological and electroencephalographic features in a case of temporal lobe status epilepticus. *Neurosurgery* 1986;18:212-216.
- e47. Szabo K, Poepel A, Pohlmann-Eden B, et al. Diffusion-weighted and perfusion MRI demonstrates parenchymal changes in complex partial status epilepticus. *Brain: a journal of neurology* 2005;128:1369-1376.
- e48. Takamura M, Hirano M, Taoka T, Ueno S. White matter T2 hyperintensity development and clinical deterioration after status epilepticus in a patient with dentatorubral-pallidoluysian atrophy. *Clinical neurology and neurosurgery* 2006;108:482-485.
- e49. Tien RD, Felsberg GJ. The hippocampus in status epilepticus: demonstration of signal intensity and morphologic changes with sequential fast spin-echo MR imaging. *Radiology* 1995;194:249-256.
- e50. Toledo M, Munuera J, Sueiras M, Rovira R, Alvarez-Sabin J, Rovira A. MRI findings in aphasic status epilepticus. *Epilepsia* 2008;49:1465-1469.
- e51. Tsuchida TN, Barkovich AJ, Bollen AW, Hart AP, Ferriero DM. Childhood status epilepticus and excitotoxic neuronal injury. *Pediatric neurology* 2007;36:253-257.
- e52. Tucker A, Miyake H, Tsuji M, Ukita T, Nishihara K. Transient occipitotemporal subcortical diffusion-weighted magnetic resonance imaging abnormalities associated with status epilepticus. Case report. *Neurologia medico-chirurgica* 2006;46:240-243.
- e53. Wieshmann UC, Symms MR, Shorvon SD. Diffusion changes in status epilepticus. *Lancet* 1997;350:493-494.