

Living with Epilepsy

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June 8th 2009

What is Epilepsy?

- Epilepsy is a tendency to have recurrent seizures that start in the brain.
- The brain controls all that we do, our consciousness, awareness, movement & posture. It does this by continually sending messages via electrical impulses to the nerve cells. If these impulses are disrupted, they misfire, causing unwanted messages to be sent. This confusion of signals causes an epileptic seizure

Diagnosing Epilepsy

- A diagnosis of epilepsy is made after 2 definite seizures within a time frame of 2 years (ILAE)
- There is no single test that can diagnose epilepsy
- History
- CT
- MRI
- Blood tests
- EEG

Seizure Types

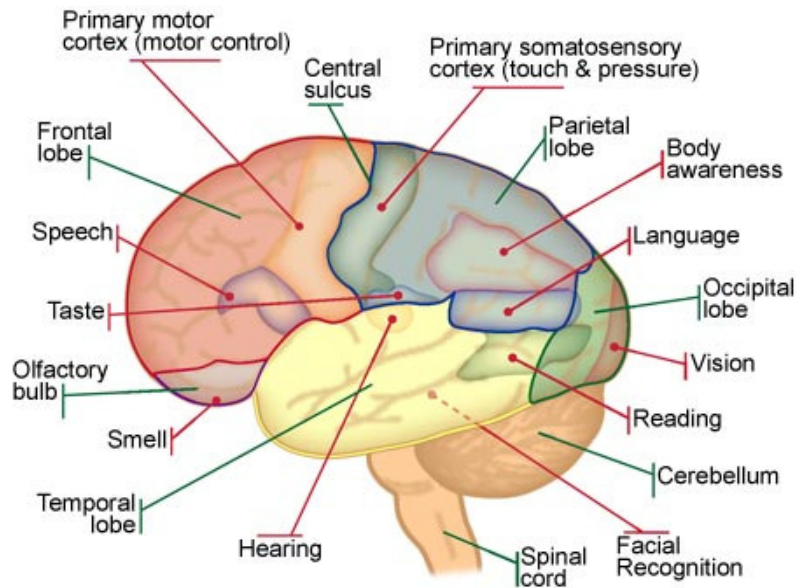
(That affect those who develop seizures as a result of cerebral tumours)

- Simple partial (Aura)-conscious level maintained e.g. epigastric rising
- Complex partial-impaired conscious level, automatisms e.g. fiddling
- Secondarily generalised tonic clonic e.g. jerking.

Seizure Precipitants

- Sleep deprivation
- Stress/anxiety
- Alcohol
- Illicit drugs
- Concurrent illness
- Change in medication/missed medication
- Hormonal imbalance

Partial Seizures



- Depending on where in the brain the seizure arises depends on what the seizure is like
- i.e. Seizures coming from the occipital lobe (which processes images) may involve patients seeing bright coloured spots or shapes during a seizure

Managing Seizures

Generalised seizures

- Protect head/limbs
- Put person in the recovery position
- Observe breathing
- Do not put anything in the persons mouth
- After seizure re-orientate the person
- If a seizure lasts longer than 5 mins please call 999

Partial seizures

- Be calm
- Do not restrain the person
- Only prevent automatisms if the person is at risk of injury
- Talk to the person-they may be able to hear you
- Re-orientate the person after the seizure
- Stay with the person for at least 30 mins after the event-people can be disorientated for up to 30 mins after a seizure

What do I need to tell my doctor about my seizures?

- Ensure that someone attends your appointments who has witnessed your seizures-if not bring a written witness account of the seizures “The Story”
- Always keep a diary of your seizures
- Ensure you bring your repeat prescription to the appointment or your medication so the doctor can ensure you are taking the correct dose



AED Therapy



- Often medication has side effects, ensure your doctor goes through these in detail
- The commonest side effect reported are fatigue or drowsiness
- If you are worried about side effects ensure you discuss this with your doctor
- Often AED interact with other medications i.e. antibiotics CBZ & Ezithromycin
- Beware of “self-fulfilling prophecy”

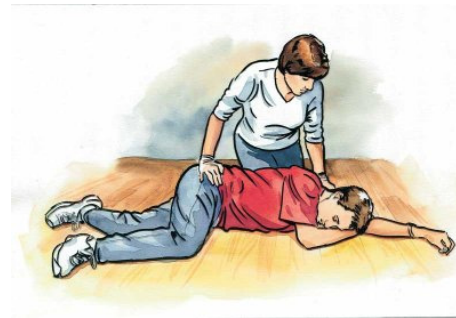
Current Antiepileptic Drugs (AED) Available

- Acetazolamide
- Carbamazepine*
- Clonazepam
- Ethosuxamide
- Gabapentin
- Lacosamide
- Lamotrigine*
- Levetiracetam
- Oxcarbazepine
- Phenobarbitone
- Phenytoin*
- Pregabalin
- Rufinamide
- Sodium Valproate*
- Tiagabine
- Vigabatrin
- Zonisamide

* most common first line AED

Emergency Treatment of Seizures

- If a tonic-clonic seizure lasts more than 5 mins call 999
- If you experience more than 2 tonic-clonic seizures within 24 hours contact your doctor
- If one experiences frequent partial seizures with no full recovery between seizures they should be reviewed by a doctor



Psychological Impact of the Diagnosis

- Stigma “perceived & real”
- Self esteem/loss of confidence
- Social isolation
- Over protection
- Effect on employment/schooling
- Relationships/dependency
- Seizure participants-stress/anxiety

Driving



- A single seizure in the normal population requires a 1 year ban for group 1 licences
- Any seizure i.e. simple partial, will prevent driving
- Grade I & II Gliomas – 1 year ban (Without seizures)
- Grade III & IV may require 2 year ban (without seizures)

Employment



- Disability employment act
- Unemployment/under-employment
- Self worth
- Statutory provision – Pilot, Train driver, Merchant, Seaman, Taxi driver
- Avoid heights, catering, dangerous machinery

Leisure Activities

- Alcohol and drug use
- Night clubs – photosensitivity
- Swimming safety
- Dangerous sports avoid i.e. scuba diving, rock climbing
- Travel insurance



Care and Management Issues

- Seizures cause “uncertainty”-increased seizures do not necessarily mean there is a change in tumour growth
- With support and education one can learn to live with ongoing seizures

Thank you