OTHER MEDICAL CONDITIONS

There are several other medical conditions that can cause seizures:

- Diabetes
- Brain Infections
- Heat Exhaustion
- Pregnancy
- Poisoning
- Hypoglycemia
- High Fever
- Head Injury

When these conditions are present, immediate medical attention is necessary.

Want more information on Epilepsy and Seizure disorders? Go To:

✓ Epilepsy Foundation

www.efa.org/education.html

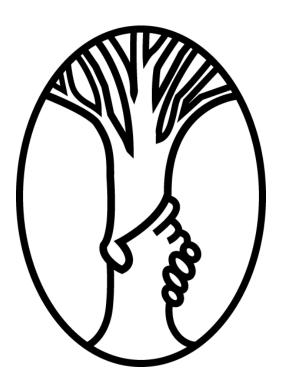
✓ Epilepsy FAQ

http://debra.dgbt.doc.ca/~andrew/epilepsy/FAQ.html

✓ The Resource Center for Persons with Disabilities 353-9642

FIRST AID CHART HTTP://WWW.EFA.ORG

RESOURCE CENTER FOR PERSONS WITH DISABILITIES



INFORMATION BULLETIN
Epilepsy and Seizure Disorders:
What You Need to Know

Epilepsy

Most people first wonder, "what is epilepsy?". The word epilepsy is derived from a Greek word meaning, "a condition of being overcome, seized or attacked." There are tremendous myths and fears that surround epilepsy; these myths and fears have affected people's attitudes toward persons with Epilepsy and in fact are probably one of the most disabling aspects of Epilepsy.

In the most direct definition of the word, "epilepsy" is a chronic condition of recurrent unprovoked seizures.

What is a Seizure?

This definition is somewhat more complex. Typically, the brain cells work together and communicate by means of electric signals with each other. Occasionally, there is an abnormal electrical discharge from a group of cells and the result is a seizure. The specific type of seizure will depend upon the part of the brain where the abnormal electrical discharge arises.

What a Seizure Looks Like:

A seizure could be a sudden cry, fall, or rigidity followed by muscle jerks, a blank stare, sudden repetitive random activities, shallow breathing or temporarily suspended breathing,

bluish skin, and possible loss of bladder or bowel control.

Seizures usually last a couple of minutes. Normal breathing will then start again. Immediately following a seizure, there may be some confusion and/or fatigue, followed by a return to full consciousness.

Seizures range in intensity; from simply a blank stare, which ends and begins abruptly, lasting only a few seconds (Petit Mal Seizure) to a sudden fall and continued jerking of muscles (Grand Mal).

The Epilepsy Foundation notes several types:

Tonic Clonic or (Grand Mal)

Absence Seizures or (Petit Mal)

Simple Partial Seizures

Complex Partial Seizures or (Psychomotor or Temporal Lobe)

Atonic Seizures or (Drop Attacks)

Myoclonic Seizures

Infantile Seizures (3 months-2 years)

These seizures all present various reactions and require varying levels of attention. The following section will briefly describe the usual response to a person having a seizure.

What to Do in Case of a Seizure

An uncomplicated convulsive seizure is not always a medical emergency, even though it may look like one. More than likely, they will naturally stop within a few minutes without ill effects. The average person is able to return to his/her activities following a period of rest and may need only limited assistance or no assistance at all.

There is No Need to Call an Ambulance When...

- 1. A medical I.D. bracelet or card says "epilepsy", and...
- 2. The seizure ends in under 5 minutes, and ...
- Consciousness returns without further incident.

If these conditions *do not* exist, or if the person has a second seizure shortly after the first, or the seizure occurred in water, then, **an ambulance should be called**. If the ambulance arrives after consciousness has returned, the person should be asked if the seizure was associated with epilepsy and if emergency room care is wanted.

It is very helpful for persons who have epilepsy or a seizure disorder to carry a list of their current medications, always ask if there is such a list to assist the emergency team.