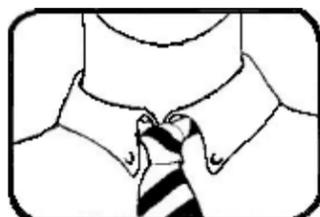


# First Aid for Seizures

(Convulsions, generalized tonic-clonic, grand mal)



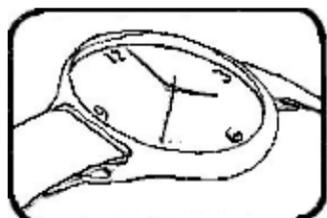
Cushion head, remove glasses



Loosen tight clothing



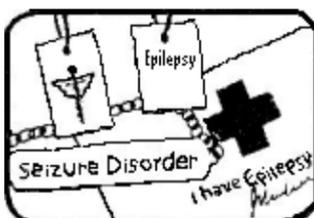
Turn on side



Time the seizure with a watch



Don't put anything in mouth



Look for I.D.



Don't hold down or restrain during or after seizure



As seizure ends...



...Offer to help

Most seizures in people with epilepsy are not medical emergencies. They end after a minute or two without harm and usually do not require a trip to the emergency room

But sometimes there are good reasons to call for emergency help. A seizure in someone who does not have epilepsy could be a sign of serious illness.

Other reasons to call an ambulance include:

- A seizure that lasts more than 5 minutes
- No "epilepsy" or "seizure disorder" I.D.
- Slow recovery, a second seizure following the first, or difficulty breathing afterwards
- Pregnancy or other medical diagnosis
- Any sign of injury or sickness



Epilepsy Society of Southern New York  
Capabilities Partnership, Inc.

(800) 640-0371

[www.learnaboutepilepsy.com](http://www.learnaboutepilepsy.com)

Prototype developed by EFA



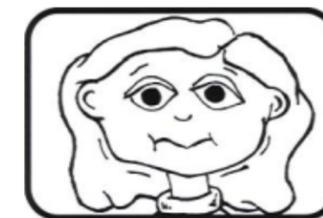
# First Aid for Seizures

(Complex partial, psychomotor, temporal lobe)

## 1. Recognize common symptoms



Blank staring



Chewing



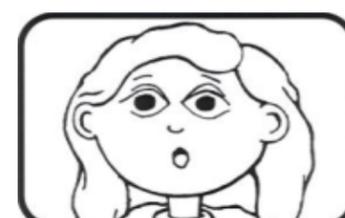
Fumbling



Wandering



Shaking



Confused speech

## 2. Follow first aid steps



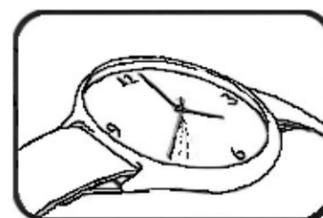
Don't grab hold



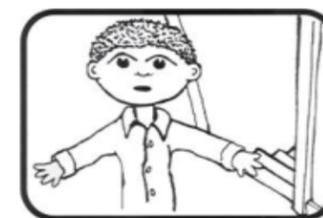
Explain to others



Speak calmly



Track time, remain nearby...



Block hazards



...until seizure ends

People who've had this type of seizure should be fully conscious and aware before being left on their own. Make sure that they know the date, where they are, and where they are going next. Confusion may last longer than the seizure itself and may be hazardous. If full awareness doesn't return, call for medical assistance.



## Epilepsy - Know the Facts

### What is Epilepsy?

Epilepsy is a neurological disorder that causes people to have recurrent seizures. A seizure is an abnormal disturbance of the electrical activity in the brain.

- Epilepsy is not contagious
- Epilepsy is not a mental illness
- Epilepsy is not mental retardation

### What Causes Epilepsy?

More than half the time, the cause is unknown. Where a cause can be determined, it is most often one of these:

- Infections that affect the brain
- Stroke
- Traumatic Brain Injury
- Errors in brain development
- Genetic factors

### Who Has Epilepsy?

Over three million Americans have epilepsy, and 200,000 new cases are diagnosed in the United States each year. One in 10 people will have a seizure at some point in their lives. Three in 100 people will develop epilepsy by the age of 75.

Epilepsy doesn't discriminate. It affects children and adults, men and women, and people of all races, religions, ethnic backgrounds, and social classes. While epilepsy is most often diagnosed in children under two or adults after the age of 65, it can occur at any age.



## EPILEPSY KNOW THE FACTS

# A Guide To Seizure Recognition And First Aid

Visit our website at:

[www.learnaboutepilepsy.com](http://www.learnaboutepilepsy.com)

Funded in part by grants from Epilepsy  
Coalition of New York State, Inc.



### How is Epilepsy Diagnosed?

Patient history, neurological examination, blood work and other clinical tests are all important in diagnosing epilepsy. Eyewitness accounts of a patient's seizures may also be important in helping the physician determine the type of seizures involved.



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### The Education Department

The **Education Department of ESSNY** provides a wide variety of services aimed at communicating knowledge of epilepsy in a manner that is easily accessible for everyone.

Our training includes:

- Presentations on managing the child with seizures for:
  - Camp counselors
  - Teachers
  - Teachers aides
  - School organizations
  - Cafeteria workers
  - Bus drivers and monitors
- Medication, psychosocial and family issues for nurses, psychologists and counselors.

- Up-to-date information with videos, PowerPoint and slides.

To help us to continue to provide educational materials, donations can be made at our website

Current as of Aug. 2012. For more recent updated information, please see our website [www.learnaboutepilepsy.com](http://www.learnaboutepilepsy.com)

For further information about the Education Department, please contact **Susanne Finn, Community Educator, (845) 627-0627 ext.148**

### Types Of Seizures

Seizures can take many different forms, often not resembling the convulsions that most people associate with epilepsy. Common types of seizures include:

- **GENERALIZED TONIC CLONIC (Grand Mal)**—Convulsions, muscle rigidity, jerking
- **ABSENCE (Petit Mal)**—Blank stare lasting only a few seconds, sometimes accompanied by blinking or chewing motions
- **COMPLEX PARTIAL (Psycho-motor / Temporal Lobe)**—Purposeless activity where the person is out of touch with his surroundings
- **SIMPLE PARTIAL**—Jerking in one or more parts of the body or sensory distortions that may or may not be obvious to onlookers. No loss of awareness
- **ATONIC (Drop Attacks)**—Sudden collapse with rapid recovery within a minute
- **MYOCLONIC**—Sudden, brief jerks involving all or part of the body while fully awake
- **TONIC**—Sudden brief body stiffness without shaking

### How Is Epilepsy Treated?

- **MEDICATION**—Most people achieve good seizure control on one or more of the variety of medications currently approved for the treatment of epilepsy. Taking medications according to schedule assures the best results.

- **SURGERY**—Several types of surgery may be used for patients whose seizures do not respond to medication. The most common are temporal lobectomy and cortical resection. These may be used when a seizure focus can be determined and removal of all or part of the affected lobe of the brain can be performed without damage to vital functions.

- **VAGUS NERVE STIMULATION**

A small pacemaker-like device is implanted in the left chest wall with a lead attached to the vagus nerve. The device is then programmed to deliver electrical stimulation to the brain at regular intervals. Many patients whose seizures do not respond adequately to medication see improvement with this method.

- **KETOGENIC DIET**—Used primarily in children, this medically supervised high fat, low carbohydrate, low protein diet has been shown to benefit many of the children who can maintain it.

### BASIC FIRST AID MEASURES FOR ALL SEIZURES ARE:

**DO** keep calm.

**DO** protect the person from injury.

**DO** remain in attendance. Stay nearby until the person is fully alert.

**DO NOT** restrain movement. You cannot stop the seizure.

**DO NOT** force anything into the mouth.

**DO NOT** offer any food or drink until the