About the Cover:
Cover artwork was created by Jess Fennell, a Studio E participant with the Epilepsy Foundation of Vermont. Studio E is a multi-week art therapy program open to people with epilepsy. It is provided through a partnership between the Epilepsy Foundation, its affiliates, and Lundbeck. Participants use art to creatively express themselves, build confidence, and make friends. Living with epilepsy can be challenging and art therapy may be beneficial in working through how the condition impacts an individual’s life. Find out more about the program and where it’s available at www.epilepsy.com.

Disclaimer:
This publication is designed to provide general information about epilepsy and seizures to the public. It is not intended as medical advice. People with epilepsy should not make changes to treatment or activities based on this information without first consulting their health care provider.
If you’ve been diagnosed with epilepsy or you recently started having seizures, you’re probably wondering how this will change your life. This pamphlet has the information you need and steps you can take to live a healthy, full life.

How will epilepsy change my life?

If you recently had your first seizure — or if your treatment isn’t working well — it’s normal to feel frustrated or overwhelmed. But with time and effort, you and your health care team can find a treatment that works.

It may help to:

- Understand your seizures, including how you feel before and after. Most seizures last for about a minute — but it might take a few hours or a day for you to feel back to normal again. If this happens, take extra care of yourself and ask for help when you need it.
• Take steps to keep yourself safe. Read the safety tips on page 15 — and go to www.epilepsy.com/safety for more ways to prevent injuries when you have a seizure.

• Stay as healthy as you can. Get enough sleep, eat healthy foods, and learn how to manage stress in your life.

• Keep in touch with your doctor or nurse. Don’t be shy — speak up if you need something or have a question.
What is epilepsy?

Epilepsy (also called a “seizure disorder”) is a medical condition that affects the brain and nervous system. Doctors will diagnose epilepsy if:

- A person has 1 or more seizures
- The doctor thinks the person is likely to have a seizure again
- The seizure was not directly caused by another medical condition, like a severe infection or diabetes

Nearly 3 million Americans — including about 300,000 older people — currently live with epilepsy and seizures. In fact, people who have seizures for the first time are often either young children or older adults.

Each person experiences epilepsy differently. Your experience may be different than someone else’s for many reasons, including the type of seizures you have, what treatment you’re on, and other health conditions you may have.
What causes epilepsy?

There are many possible causes of epilepsy, including a genetic cause (something you were born with) or a head injury.

The common known causes of epilepsy in older adults are:

- Having a stroke
- Alzheimer’s disease
- Having a head injury
- Having a brain tumor
- Getting an infection that affects the brain

For about 1 in 2 older people who live with epilepsy, doctors can’t identify the cause of the seizures — but the seizures can still be treated.
What is a seizure?

Your brain uses electrical and chemical signals to communicate with the rest of your body. A seizure happens when your brain is overloaded by an abnormal amount of electrical and chemical activity.

There are more than 20 different types of seizures. All of the different seizure types are considered either “generalized” or “partial.” The type of seizure depends on where the abnormal activity occurs in your brain — and how much of the brain is involved.

- If the seizure involves your entire brain at the same time, it’s called a generalized seizure. These types of seizures always make you lose consciousness (pass out). You may have convulsions, fall, jerk, or go stiff. Or, you may just stare off into space for a few seconds.

- If the seizure involves only part of your brain, it’s called a partial seizure (or a “focal seizure”). During these types of seizures you may feel confused, have slurred speech, smell or see things that aren’t there, or move in odd or unusual ways. Some types of partial seizures also make you lose consciousness.
What types of seizures are common in older adults?

Partial (focal) seizures with altered consciousness

Many older adults with epilepsy have a type of partial seizures with altered consciousness, sometimes called a complex partial seizure. With this kind of seizure, you aren’t in control or aware of what’s happening and you won’t remember it afterwards.

The main signs of complex partial seizures are:

- Blank staring
- Fumbling, lip smacking, or other involuntary (unconscious) movements
- Wandering around
- Mumbling or talking nonsense
- Seeming confused or afraid

These changes are temporary and usually last 1 to 3 minutes. Afterwards, you may feel groggy, confused, or like you’ve lost sense of time.

Partial (focal) seizures with no change in consciousness

If you have the kind of partial seizure where you don’t lose consciousness,
sometimes called a simple partial seizure, you will probably feel strange or different in some way. Parts of your body may jerk or move without your control. Or, you might feel sudden, strong emotions or see things that aren’t there.

Other seizure types

Other types of seizures look and feel different. For example, signs of a generalized tonic-clonic seizure (previously called a grand mal seizure) include becoming very stiff, falling down, and then having muscle jerks – also called convulsions.

You can learn more about all the different types of seizures by visiting the website www.epilepsy.com/seizuretypes.

Will I know a seizure is going to happen?

Maybe. If you feel something unusual (like dizziness or a funny feeling in your stomach) before a seizure, that’s called an aura. An aura is a warning that you may be about to have a seizure. You can then tell other people that you feel a seizure coming on so they can help.
First Aid for Seizures

When people know what to do and how to help you during a seizure, you’ll be safer — and they’ll feel better, too. So don’t wait to start a conversation. Share these first aid instructions with your family, friends, or caregivers.

“Care and Comfort” First Aid for All Seizures

Follow these steps to give basic “care and comfort” first aid for all types of seizures.

- Stay calm.
- Make sure the person can breathe.
- Time the seizure to see how long it lasts.
- Prevent injury by moving sharp objects out of the way and protecting the person from traffic and other dangers.
- Make the person as comfortable as possible.
- Keep onlookers away.
- Stay with the person until the seizure is over.
- Be sensitive and supportive, and ask others to do the same.
First Aid for Seizures with Loss of Consciousness

For a seizure that causes the person to become unconscious (such as a generalized tonic-clonic seizure), follow the steps for care and comfort first aid and be sure to:

- Protect the person from injury.
- Make sure they can breathe.
  - If they’re lying down, turn them to one side to help keep the airway open.
  - If they’re sitting, gently turn their head to one side. Don’t let the head fall forward or back.
- Don’t put anything in their mouth.
First Aid for Seizures with Altered Consciousness

With some types of seizures (including complex partial) the person appears to be conscious even though they aren’t fully aware of what’s happening. This can put them at risk for injury.

For these kinds of seizures, follow the steps for care and comfort first aid and be sure to:

• Keep the person away from sharp objects or dangerous places. If they are moving around, you may need to guide them away from dangers. If you grab the person, they may push back — so be gentle.

• Tell them they are safe and give instructions about what they should do, but don’t assume they can hear you.

When to Call 911

Call 911 if any of these things happen during or after a seizure:

• The seizure lasts longer than 5 minutes

• The person doesn’t wake up within 5 to 10 minutes after convulsions stop
• The person was hurt or injured during the seizure
• The seizure happened when the person was in water
• Another seizure starts right after the first one
• The person has diabetes or another serious illness

“Be sure the people you spend time with know how to help if you have a seizure. You might want to write a seizure response plan and share it with your family and friends. A seizure response plan is a document that lets people know what to do when you have a seizure. You can find sample seizure response plans at www.epilepsy.com/response plans.”
What’s the most common treatment for epilepsy?

Medicine is the most common treatment for epilepsy. Seizure medicines will successfully control seizures for about 7 out of 10 people with epilepsy.

There are many different medicines for seizures. It can take some time for you and your doctor to find out which medicine and dose (amount) works best for you.

Some medicines can interact (mix dangerously) with others, so it’s important to tell your doctor if you take medicine for any health condition besides epilepsy. When the doctor knows what you already take, they’ll be able to prescribe a seizure medicine that will work better for you and is less likely to cause a bad interaction.
What if the medicine has side effects?

Some side effects are minor, but some are serious. When you start taking a new medicine, ask your doctor what side effects to watch out for.

Remember, the goal of treatment is no seizures and no side effects. Tell your doctor if you’re not happy with your treatment. There’s probably a different dose — or a different medicine — you can try.

Never stop taking your seizure medicine on your own. Always talk to your doctor first.

What if I forget to take my medicine?

The best way to prevent seizures is to take your medicine exactly the way the doctor or pharmacist tells you to.

Try these tricks to help you remember:

- Keep your medicine in a place that’s easy to see, like the kitchen table.
- Write yourself a note and put it on the bathroom mirror.
• Set a daily alarm or a reminder on your phone or wrist watch.
• Use a weekly pill box.

Ask your doctor ahead of time what to do if you miss a dose.

What if medicines don’t work for me?

Seizure medicine is the most common treatment for epilepsy, but it’s not the only option. You may want to ask your doctor to suggest a different treatment if medicines aren’t working — or if you are very sensitive to side effects caused by medicines.

Other treatments for epilepsy and seizures include dietary therapies, surgery, and electrical devices that can control seizures. You can learn more about treatment options by visiting www.epilepsy.com/treatment.
Thinking about Safety

Most seizures won’t hurt you, but you are at risk for injuries like falls, burns, or drowning if you lose consciousness. There are simple steps you can take to keep yourself safe when a seizure happens. Your doctor may also have specific safety tips for you based on the type of seizures you have.

How can I prevent injuries at home?

Follow these tips to keep yourself safe at home:

- Take showers instead of taking baths.
- Cook with a microwave instead of using the stove — especially when you’re alone.
- Put padding on hard edges of tables and other furniture. Install soft carpets instead of hardwood floors if you can.
- Keep walkways and floors clear of anything you could trip over.
• Think about moving to an apartment or house that doesn’t have stairs.
• Consider getting a seizure alert monitor that you can wear when you’re at home.

“
It’s a good idea to have someone nearby when you shower, use the stove, or do other things that could be dangerous if you have a seizure.
”
Can I drive if I have epilepsy?

It depends. If your treatment is working and you haven’t had seizures in a while, you may be able to drive. The laws are different in each state, but most states need to hear from your doctor that you’ve been seizure-free for a certain amount of time and that it’s safe for you to drive.

Even if you can’t drive right now, you still have options. Local organizations for older adults or faith-based groups often have volunteers who can drive you places. If there’s public transportation in your area, find out about taking the bus or train — or ask the transit company about paratransit (door-to-door) service.

- If your seizures aren’t controlled, don’t drive. You could have a seizure while driving and have an accident.
- If you need help or care at home, find services in your area by searching the Eldercare Locator at www.eldercare.gov or by calling (800) 677-1116.
Remember, epilepsy is a medical condition that can be managed. You can continue to live a full and active life.

Learn More – Visit www.epilepsy.com to:

- Look up the driving laws in your state.
- Find safety tips for home, work, and travel.
- Connect online with other people living with epilepsy.
This publication was made possible with funding from the Centers for Disease Control and Prevention (CDC) under cooperative agreement number 1U58DP003832-05. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.

www.epilepsy.com • 800.332.1000

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About the Epilepsy Foundation
The Epilepsy Foundation, a national non-profit with nearly 50 local organizations throughout the United States, has led the fight against seizures since 1968. The Foundation is an unwavering ally for individuals and families impacted by epilepsy and seizures. The mission of the Epilepsy Foundation is to stop seizures and sudden unexpected death in epilepsy (SUDEP), find a cure, and overcome the challenges created by epilepsy through efforts including education, advocacy, and research to accelerate ideas into therapies. The Foundation works to ensure that people with seizures have the opportunity to live their lives to their fullest potential. Local Epilepsy Foundations throughout the country have additional materials and offer a variety of programs to help people understand this common disorder. For additional information, please visit www.epilepsy.com or call us at 1.800.332.1000.

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