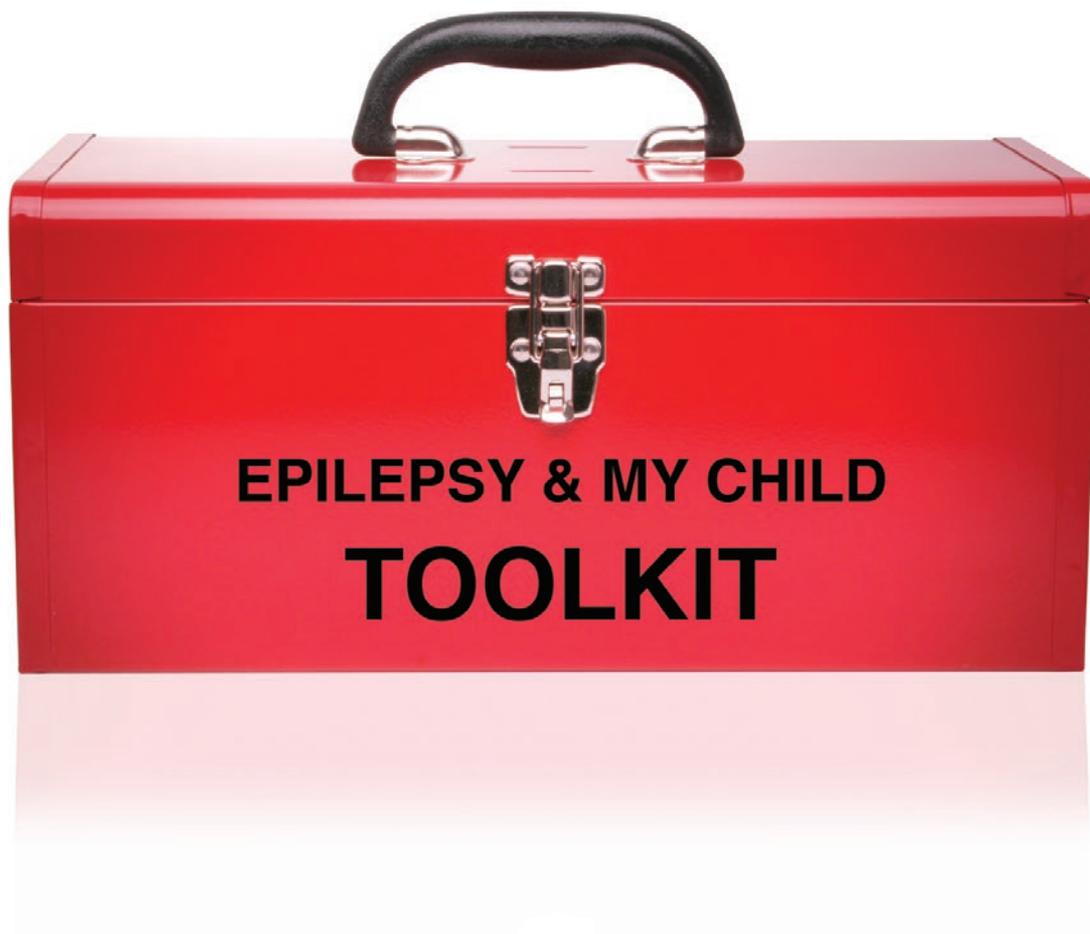


Epilepsy & My Child Toolkit

A Resource for Parents with a Newly Diagnosed Child



About Epilepsy

What is Epilepsy?

Epilepsy is a neurological condition characterized by recurrent seizures. Clusters of nerve cells, or neurons, in the brain sometimes signal abnormally and cause a person to have seizures. Epilepsy is one of the most common neurological disorders worldwide, affecting 50 million persons, including an estimated 2.2 million persons in the United States.¹ Of the 2.2 million, 316,000 are children and youth aged 14 and younger. Every year, approximately 50,000 new cases of epilepsy are diagnosed in children and adolescents under the age of 18.² To be diagnosed with epilepsy, a child must have had more than one seizure that was not caused by another treatable condition.

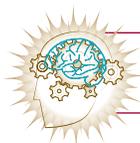


Epilepsy affects every child differently depending on age, types of seizures, response to treatment and whether or not the child has other health issues, etc. For some, the seizures are easily controlled with medicine and eventually outgrown. For others, epilepsy can create difficult challenges throughout their lives.

Epilepsy affects people from all communities, many of whom do not have any family history of seizures. Seventy percent of cases are classified as idiopathic epilepsy, a term used when an identifiable cause cannot be found. Among the rest, the cause can be related to brain malformations, tumors, or hemorrhage, metabolic/genetic conditions, infectious diseases such as meningitis or encephalitis, birth trauma and high-risk pregnancies.³

In recent years, there have been many improvements in treating epilepsy, making it a manageable condition for most. Many medications are available and more are being tested all the time. In addition to medication, there are also alternative treatments for children who continue to have seizures while on medication. Additional general information about epilepsy can be found on the following Web sites:

- Epilepsy Foundation: www.epilepsy.com
- National Library of Medicine: www.nlm.nih.gov/medlineplus/epilepsy.html
- Centers for Disease Control and Prevention: www.cdc.gov/epilepsy



Epilepsy?—two or more seizures not caused by another treatable condition.

What is a Seizure?

A child's brain has billions of nerve cells that "talk" or communicate with each other through tiny electrical charges. If too many of these cells suddenly fire together, a wave of electrical energy sweeps through the brain and causes a seizure. During a seizure, a child might stare blankly, lose consciousness or make jerky, uncontrolled movements called convulsions. Most seizures last less than two minutes, but afterward a child might feel sick, weak or confused.

While all epileptic seizures are caused by electrical disturbances in the brain, there are many different kinds of seizures. The kind of seizure a child has depends on whether the whole brain is affected—generalized seizures—or just a certain part of it—focal seizures. Some children have just one type; others may have a combination of seizure types. Children's behavior, risk of injury and treatment depend upon the type of seizures they have.

It is important to help your doctor identify what type of seizures your child is having. Use the *Seizure Recognition and First Aid* table and *Seizure Record* form included in the *Forms* section to help you. You might want to give teachers and other caregivers copies as well.

Myths & Facts

Despite progress in educating the public about epilepsy, some myths about epilepsy still exist. It helps to know what they are, so you can let others know that they are not true. Here are some of the most common myths:

Myth: A child having a seizure can swallow his tongue.

Fact: No one can swallow their tongue. Any efforts to hold the tongue down or put something in the mouth of a child having a seizure can hurt the teeth or jaw.

Myth: People with epilepsy are possessed by the devil, cursed and/or "spirited".

Fact: Epilepsy is simply a neurological (brain) disorder.

Myth: You should hold down a child who is having a seizure.

Fact: You should not hold down a child, just make sure the area near the child is safe by moving aside any hard or sharp objects or furniture.

Myth: You should perform artificial respiration on someone having a seizure.

Fact: Artificial respiration is only needed if the person does not start breathing after the seizure has stopped.

Myth: People with epilepsy and seizures are mentally ill or intellectually or developmentally disabled.

Fact: Epilepsy and mental illness and/or intellectual or developmental disabilities are all different conditions that can affect the brain. People with epilepsy and seizures are just like the rest of us.

Myth: You can tell that a person has epilepsy by the way he or she looks.

Fact: There's no way to tell that someone has epilepsy and seizures just by looking at them.

Myth: If someone in the family has epilepsy, the children will too.

Fact: Epilepsy can happen when there's no family history at all. Sometimes children of a parent with epilepsy will have seizures, but it's far more likely that they will not.