

# SEIZURE!

## What to do, how to prepare

By Patty McGoldrick, NP, and Steve Wolf, MD

**F**or most kids, preparing for the coming school year means purchasing new books. But for children with a history of seizures, preparation must include seizure treatment plans as well. Here, we answer many of the questions parents and teachers frequently ask regarding children with seizures and how to properly care for them.

### WHAT IS A SEIZURE?

A seizure occurs when there is a surge of electricity in the brain, much like a lightning storm. Two types of seizures can result from this surge, depending on the extent to which the extra electricity spreads.

Partial seizures, sometimes called focal seizures, occur when the burst of excess electricity is restricted to only one part of the brain. A generalized seizure — what most people think of as a typical “seizure” — results from electricity surges across larger brain areas.

### WHAT DOES A SEIZURE LOOK LIKE?

A child with partial seizures may or may not lose consciousness, and also may begin acting strangely, performing typical functions but for no real purpose. For example, the child may begin tugging at his or her clothing or repeating nonsensical words.

Generalized seizures may cause the child to lose consciousness, fall to the ground, or injure herself through tongue biting. Different varieties can manifest differently. For example, a child with absence seizures (pronounced ab-sahn-ce) can look like he is merely staring off into space, whereas a child with myoclonic seizures can have brief jerking moments.

### WHAT CAN PROVOKE A SEIZURE?

Seizures are more likely to occur when a child is ill, injured, or running a fever. Children up to around age 6 may experience benign febrile seizures, which often occur with a high fever or when the child’s temperature is rising or falling. Febrile seizures tend to run in families, so if one child has a history of febrile seizures, chances are some of his siblings may also experience febrile seizures. Every child is different, however. Some children may not need a high fever to cause a febrile seizure, and some children may experience prolonged febrile seizures that continue past the age of 6.

### WILL THE SEIZURES GO AWAY?

Epilepsy is a seizure disorder characterized by the occurrence of two or more unprovoked seizures. The vast majority of children diagnosed

with epilepsy will have their seizures well controlled by medication and will outgrow the disorder. There is a small percentage, however, that require further interventions in the form of treatment with multiple medications, specialized diets or, in some drastic cases, surgery.

### HOW CAN I HELP MY CHILD DURING A SEIZURE?

First of all, do not panic! In the majority of cases, the seizure will run its course and the child will return to normal within a few minutes. To ensure the child’s safety during a generalized seizure, make sure the child is on her side and nothing is in the mouth. Forcing an object into the mouth of an individual who is seizing is a common mistake and is highly dangerous. You may want to loosen the child’s clothing if it is constrictive, and if the child is wearing eyeglasses, you should remove them. In the case of a child who is experiencing a partial seizure, stay with the child and check for a med alert bracelet. If the child is combative, call for help and explain that the child may be having a seizure.

### WHEN SHOULD I USE DIASTAT ACUDIAL?

Many children (and adults) use Diastat AcuDial, valium that is administered rectally, to stop a seizure or a cluster of seizures. Diastat comes in a prefilled rectal applicator and should be with the child at all times, in case of emergency. Diastat may be used anywhere, and is particularly useful for treatment outside of a hospital.

### HOW CAN I MAKE A SEIZURE PLAN FOR MY CHILD?

Anyone who experiences seizures (even if he hasn’t had a seizure in months) should have a seizure treatment plan indicating what relatives, teachers, coaches, and caregivers should do when and if a seizure occurs. This allows the child to live a normal life and provides some measure of control over the seizures. The child’s school, family, and caregivers should be notified of the type of seizures the child tends to exhibit, the typical appearance and duration of these seizures, and the medications and dosages the child is treated with. The treatment plan should also include the doctor’s name and contact information, any



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## Seizure...

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known allergies the child has, as well as the dose of Diastat AcuDial and how and when to administer it.

### WHAT IF MY CHILD SEIZES IN AN ODD LOCATION?

Anyone providing care for a child at risk for seizures should be familiar with first aid and prepared to deal with seizures in any environment. If the child seizes on public transportation, for example, lay the child down across the seat, turn the child on her side, and protect her from harm while the seizure runs its course. If possible, place padding around the seizing child to protect him from injury. Diastat can be administered under the cover of a jacket or blanket. Lower the child to the aisle floor if necessary. If the child is in a wheelchair, lift him out and follow usual first aid instructions. However, if the child is too big to transfer easily, secure the wheelchair and make sure the seatbelt is locked.

If the child seizes in the pool or in any kind of aquatic environment, support the child so that the nose and mouth remain above the water. Remove the child from the water as quickly as possible, and check for aspiration.

### SHOULD I RESTRICT MY CHILD FROM CERTAIN ACTIVITIES?

Children with epilepsy should be treated as normally as possible. Most have seizures that are well controlled on their medication regimen. There are certain environments, however, in which special precaution should be taken. For example, while children with epilepsy can swim safely if their seizures are well controlled, no child at risk for seizures should swim alone.

### WHEN SHOULD I CALL THE NEUROLOGIST?

The neurologist should be notified of any seizure activity, especially if the seizure type has changed in any way. This allows for changes in treatment and the ordering of additional tests.

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## Recharge..

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—Designate a no phone or electronic organizer time each day, and leave work in your office at the end of the day, if possible.

—Resist the temptation to sneak back online and answer just a few more emails. Keep this as sacred time for you!

### CREATE AN ENERGIZING SPACE

—When you walk into an aromatic space, there's an instant feeling of rejuvenation. Scents can create a wonderful ambiance:

—Citrus scents – such as grapefruit – can enliven any room. Buy a citrus-scented candle or spray.

—Make your own potpourri. Place cloves in the rind of an orange or grapefruit for the kitchen counter.

### GET MOVING

—Schedule time for exercise every-day because it never happens if left up to chance. Working out gives you more energy and makes you feel healthier.

—Go for a walk during your lunch break or with your children to boost your energy in the afternoon.

—Choose a parking spot farther away from your destination to get in those extra steps when you can. According to the American Heart Association, walking 10,000-12,000 steps a day can do almost as much good for your health as 60 minutes of vigorous exercise.

—Keep fitness fun — not only for you but for your family. Interactive videogames such as tennis or dancing help everyone stay fit in a fun way.

STACY DEBROFF is a parenting expert, founder of MomCentral.com, author of *The Mom Book: 4,278 of Mom Central's Tips - For Moms from Moms*. She energizes with Ocean Spray's® Cranergy™ Energy Juice Drink with green tea extract, B vitamins, vitamin C and cranberry juice.