



## Fact Sheet

### Seizure

#### *What Is a Seizure?*

A seizure is a temporary period of disorganized brain electrical activity. There are many types of seizures and symptoms such as rhythmic jerking movements of the arms and/or legs on one or both sides of the body, lip-smacking, and staring spells. Generalized seizures are often associated with more significant symptoms such as falling to the ground, being unresponsive to others, and/or losing control of urine. Focal seizures often affect a portion rather than all of the brain and therefore may have less visible signs during the episode. Sometimes seizures happen as a result of head injuries, brain tumors, brain development problem, genetic illnesses, and fevers. There are many seizures that do not have a known factor. Seizures can occur at any time of the day, and most episodes will resolve in less than 5 minutes.

Anyone who has a seizure disorder may have a seizure while running, walking, sitting, sleeping or standing, but there is no higher risk of seizure with physical activity and no higher risk of injury when walking or running as compared with just standing.

#### *How Can Seizures Affect a Teen at School?*

Because of the episodic nature, youth with seizure disorders should be encouraged to fully participate in school with a few exceptions. It is very important for youth with seizures to get adequate sleep, take medication as directed and participate in fitness activities. Some youth have “auras,” a sensation they feel prior to a seizure that sometimes let them know a seizure is about to occur. A youth may have fatigue and confusion for several minutes to hours after a seizure, which can impact their educational performance. Some youth need only one medication for their seizures, while others may need a combination. All medications can cause some kinds of side-effects. It is important to watch for side effects such as drowsiness or irritability to help physicians appropriately adjust medications and effects on learning (e.g. memory, attention, concentration, distractibility, impulsivity, delays in response time, abstract reasoning problems, organizational skills deficits, performance inconsistencies, and reduced visual and motor functioning).

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Certain precautions are recommended to avoid injury (e.g. climbing ladders, cooking alone, no driving until seizure-free for 6 months, no swimming alone, and avoiding alcohol and flashing videogames). These rules are to attempt to avoid car accidents, falls from high places, drowning or burns, or triggering of a seizure.

### ***How Do We Work with Youth with Seizures at School?***

All youth with seizures should have an individual health plan and an emergency health plan. As youth age, they should be encouraged to know about their medications and develop methods to be very accurate with daily use of medication.

If a youth is having a seizure, you can:

1. Move any hazards away from the person.
2. Protect the person from falling and hitting the ground or other furniture.
3. Roll the person on his/her side.
4. Do not hold down any part of the person's body.
5. Do not put anything in the person's mouth.
6. Watch the movements and length of time of the seizure so you can describe it as needed.
7. Give the person privacy by encouraging onlookers to move away.
8. Use a watch to time the seizure and if it lasts more than five minutes, call an ambulance.
9. Once the seizure is over, the person may be confused or sleepy. Therefore, comfort the person and when he/she is able, move to a quiet place to rest.
10. Follow the individual plan for next steps, such as notify the family, school nurse, doctor's office. ♦