

SEIZURE FIRST AID IN THE AGE OF COVID-19

SEIZURE TYPES



TONIC-CLONIC SEIZURES

RECOGNIZE THE SEIZURE:

- ▶ Can start with a sudden cry or gasp
- ▶ Person will lose consciousness and fall to ground
- ▶ Limbs will get stiff and then rapidly jerk (convulsions)

RESPOND TO THE SEIZURE:

- ▶ Time the seizure
- ▶ Cushion their head and loosen tight clothing
- ▶ Turn them on their side
- ▶ Stay with them until seizure ends or help arrives
- ▶ **NEVER** hold the person down
- ▶ **NEVER** put something in their mouth or hold their tongue
- ▶ **NEVER** give oral medications until conscious
- ▶ **NEVER** use artificial respiration during the seizure



FOCAL SEIZURES

RECOGNIZE THE SEIZURE:

- ▶ Symptoms of seizure will depend on the individual
- ▶ May stare blankly and may exhibit chewing motions
- ▶ May fumble with hands and may experience shaking
- ▶ May appear to wander aimlessly

RESPOND TO THE SEIZURE:

- ▶ Time the seizure
- ▶ Speak calmly
- ▶ Guide away from hazards
- ▶ Stay with them until seizure ends or help arrives
- ▶ **NEVER** grab, restrain, or hold the person, unless necessary to protect them from danger

CALL 911 IF:

- ▶ If it is a first time seizure
- ▶ It is a new type of seizure for the person
- ▶ A convulsive seizure lasts longer than 5 minutes
- ▶ Seizures happen back-to-back (very close in time)
- ▶ A seizure happens along with another injury
- ▶ A seizure happens in water
- ▶ The person has diabetes or is pregnant

COVID-19 RECOMMENDATIONS

You should feel confident and comfortable that by taking a few small steps, you can provide quality care and support to students having a seizure, even in the face of COVID-19.

REMEMBER

- ▶ Keep your mask on
- ▶ Wear gloves if you have them
- ▶ Remove the mask of the person or student having a seizure
- ▶ Keep others at least 6 feet away
- ▶ When the student's awareness returns, have them replace their own mask when they are able to
- ▶ Wash your hands as soon as possible



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EPILEPSY AND SEIZURES

WHAT IS EPILEPSY?

Epilepsy (often called a “seizure disorder”) is a neurological condition that causes a person to have recurring seizures. A doctor may diagnose a person with epilepsy if they have one or more seizures, the doctor expects the seizures to continue, and the seizures are not caused by another medical condition (such as diabetes/low sugar, an infection, or fainting). Epilepsy is a spectrum disorder. The impact of epilepsy varies from person to person. Epilepsy is generally a chronic or lifelong condition.

WHAT IS A SEIZURE?

When there are excess electrical discharges in the brain, seizures occur. Seizures can alter awareness, physical movements, consciousness, or actions. Seizures may also include one or more of the following symptoms: a vacant stare, stiffening of the muscles, muscle spasms, drooling, loss of bladder or bowel control, slowing or temporary halt in breathing, and auditory or visual hallucinations.

TREATMENTS FOR EPILEPSY

The most common treatment for epilepsy/seizure disorder is anti-epileptic medications. Many people who have epilepsy can control their seizures by taking medicines. However, the side effects of medications can be severe, and for some people medications have little or no control over their seizures. Surgical treatments, medical implants, or a special diet (called a “ketogenic” diet) are sometimes recommended for the treatment of epilepsy in addition to medications. Some rescue medications are available for patients who experience cluster seizures (repetitive seizures close in time) or seizures that last a long time and do not stop.

QUICK FACTS

- ▶ 3 million adults and 470,000 children in America have active epilepsy (were diagnosed with epilepsy, are currently taking medication to control it, and/or have had a seizure in past year).
- ▶ 5.1 million Americans have a history of epilepsy (both children and adults).
- ▶ 1 in 10 people will have a seizure during their lifetime.
- ▶ The cause of a person’s epilepsy is unknown for 2/3 of people living with epilepsy.
- ▶ Common causes for epilepsy include: head trauma, brain tumors and strokes, poisoning, infection, and maternal injury.
- ▶ Some rare forms of epilepsy are genetic.
- ▶ Epilepsy is never contagious.
- ▶ Some people experience an aura (a funny feeling, weird smell, or other warning) before a seizure occurs.
- ▶ Some people with epilepsy can have seizures triggered by: not getting enough sleep, flashing lights, stress, anxiety, and hormonal changes.
- ▶ A seizure can happen anywhere, at any time.
- ▶ Anyone can be affected by seizures.



SEIZURES IN SCHOOLS AND COVID-19

EPILEPSY IN SCHOOL

Children with epilepsy are at risk of having seizures at school. These students often need medication during the school day, are at risk for developing learning problems as comorbid disorders, and could need modifications to the physical and instructional environment to succeed. All students with epilepsy should have a Seizure Action Plan based upon the recommendations of the student’s physician and parents that outlines the best steps to address seizure first aid and the medical needs of the student. The Seizure Action Plan should be incorporated into all aspects of the student’s school life.

SEIZURE FIRST AID AND THE CORONAVIRUS

Helping a student who is having a seizure often requires hands-on help. It is not uncommon to feel a bit uncomfortable or even frightened when you witness a seizure. The idea of providing hands-on support for a seizure during a pandemic may be a concern for you. Of course, just because we are facing coronavirus (COVID-19) doesn’t mean students who have epilepsy don’t need and don’t deserve our help.

You should feel confident and comfortable that by taking a few small steps, you can provide the same level of quality care and support your students and families have always known from their school and health services staff. When providing seizure first aid:

- ▶ Keep your mask on
- ▶ If you have gloves, wear them
- ▶ Remove the mask of the student or person having a seizure
- ▶ Keep others at least six feet away
- ▶ When the student’s awareness returns, have them replace their own mask when they are able to
- ▶ Wash your hands as soon as possible

VIRTUAL LEARNING FOR CHILDREN WITH SEIZURES

Working with students who have learning disabilities and health conditions is a challenge in our schools, in both face-to-face and virtual environments. Here are a few tips to successfully work with students who have epilepsy in the virtual learning environment:

- ▶ Find out if the student’s seizures are impacted by use of technology, screen time, back lighting, etc.
- ▶ In advance, work out a Seizure Alert and Action Plan with someone in the home so that if you notice seizure activity in a student, you are prepared to respond online, just like you would in person.
- ▶ If possible, record your zoom lectures and classroom discussions so that students who have missed instructional time can still see what they may miss.
- ▶ Offer or look for remote one-on-one tutoring services for your students.

- ▶ Establish a regular routine for checking in with the student and checking on the student’s progress.
- ▶ Encourage the student to use multiple methods of communications, texting, emails, and calls.
- ▶ Be Proactive, Offer Options, and Stay in Touch!

SEIZURE TRAINING

Free seizure recognition and first aid training is available from the Epilepsy Alliance America (EAA) and many of its local member organizations.

Contact the EAA or the organization listed below for more information.



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