

Epilepsy is not Easy! by Coach Slade

Epilepsy and **Seizures can develop** in any person of any color, sex, size or at any age. **Epilepsy** is more common in young children and older people. Slightly more men than women have **epilepsy**. Some people are born with Epilepsy. About 1 in 100 people will have an unprovoked **seizure** in their lifetime. **Epilepsy** is not a **mental illness**. In fact, most people living with **epilepsy** have no cognitive or psychological problem.

The Americans with Disabilities Act (ADA) was enacted to prohibit disability-based discrimination. Title I of the Act prohibits employment discrimination against qualified individuals with disabilities and applies to private employers with 15 or more employees. A "qualified individual" with a disability is one who can perform the essential functions of the job, with or without reasonable accommodation. The ADA equally protects all disabled individuals regardless of which state they live in.

I developed Epilepsy 10 years ago. I had my first seizure in the office of my Assistant Principal. It was my Lunch period & he asked me to input some of the students grades for him. He asked me what I wanted from the Cafeteria & I started inputting the grades. Two Hours later, I wake up in a hospital room with my Husband looking at me! He told me my school called him and told him that I was rushed to the Hospital because my AP found me passed out on the floor of his office. The doctor came in and said that since I have no history of epilepsy, first seizure in my life he contributed to my sugar levels dropping and I haven't eaten all day. I was discharged & told to follow up with a Neurologist. I did, was told that it was probably due to my sugar levels and to make sure I eat, sleep & stay stress free. I didn't have another seizure until a year later.

My Epilepsy does not affect my ability to educate & teach. I love teaching and I develop strong bonds with each class I teach. I have always taught and coached in large multicultural Schools for over 20 years. I am qualified and educating our youth is very rewarding. Having Epilepsy makes me more sensitive to the needs of children that are different for whatever reasons. I try to be a positive role model and answer questions honestly. I encourage my students to talk about the things that they feel are wrong with them or is an issue. This practice works well because they learn that we are all different and that is OK. Just because someone has a Disability or an issue, it does not stop them from being a popular member of the class or society.

No one wants to be identified as having a disability especially Epilepsy. It's a lonely existence. Some people have a negative attitude about Epilepsy as well as indirect & direct discrimination. "It's complicated, in that I think a big problem is that society & teachers don't get educated in working with people & children with epilepsy and therefore they don't have a good understanding of it," Fear leads to having a more negative attitude towards anything.



TIPS FOR SEIZURE OBSERVATION AND RECORDING

When watching a seizure, try to note what happens before, during, and after the event. Write down what happened as soon as you can. Include as much information as possible about the following areas:

BEHAVIOR BEFORE THE SEIZURE - what was the person doing at the time of event, change in mood or behavior hours or days before, 'warning' or 'aura' shortly before event.

WHEN EVENT OCCURS - date, time

POSSIBLE TRIGGERS OR FACTORS THAT MAY MAKE EVENT MORE LIKELY TO OCCUR

- Time of day or month
- Menstruation, pregnancy, changes in contraception, or other hormonal treatment
- Missed, late, or changes in medicines
- Irregular sleep patterns, not enough sleep, other sleep problems
- Irregular eating patterns, specific foods
- During or after exercise or hyperventilation (fast breathing)
- Alcohol or other drug use
- Emotional stress, worry, excitement
- Sounds, flashing lights, bright sunlight
- Other illnesses or infections

WHAT HAPPENS DURING THE EVENT

- Change in awareness, alertness, confusion
- Ability to talk and understand
- Changes in thinking, remembering, emotions, perceptions
- Sensations - changes in seeing, twitching, eye blinking or rolling, drooling
- Changes in muscle tone - body becomes stiff or limp
- Movements - jerking or twitching movements, unable to move, body turning, falls
- Automatic or repeated movements - lipsmaking, chewing, swallowing, picking at clothes, rubbing hands, tapping feet, dressing or undressing.
- Walking, wandering, running
- Changes in color of skin, sweating, breathing
- Loss of urine or bowel control

PART OF BODY INVOLVED - where symptom started, spread to other areas, side of body (right, left, or both)

WHAT HAPPENS AFTER EVENT

- Response to voice or touch
- Awareness of name, place, time
- Memory for events
- Ability to talk or communicate
- Weakness or numbness
- Changes in mood or how person acts
- Tired, need to sleep

HOW LONG IT LASTED - length of aura, seizure, after-effects or postictal phase, how long before person returns to normal activity.

Adapted with permission from the Comprehensive Epilepsy Center, Beth Israel Deaconess Medical Center, Boston, Massachusetts, 2006.

Seizure First Aid

How to help someone having a seizure

1

STAY with the person until they are awake and alert after the seizure.

- ✓ **Time** the seizure
- ✓ Remain **calm**
- ✓ Check for **medical ID**



2

Keep the person **SAFE**.

- ✓ Move or guide away from **harm**



3

Turn the person onto their **SIDE** if they are not awake and aware.

- ✓ Keep **airway clear**
- ✓ **Loosen tight clothes** around neck
- ✓ Put **something small and soft** under the head



Call
911
if...

- ▶ Seizure lasts longer than 5 minutes
- ▶ Person does not return to their usual state
- ▶ Person is injured, pregnant, or sick
- ▶ Repeated seizures
- ▶ First time seizure
- ▶ Difficulty breathing
- ▶ Seizure occurs in water

Do
NOT

- ✗ Do **NOT** restrain.
- ✗ Do **NOT** put any objects in their mouth.
- ✓ **Rescue medicines can be given** if prescribed by a health care professional

Learn more: [epilepsy.com/firstaid](https://www.epilepsy.com/firstaid)



[epilepsy.com](https://www.epilepsy.com)

24/7 Helpline: 1-800-332-1000

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