



November is **National Epilepsy Awareness Month** It's Time to *Talk About It!*

1. Epilepsy can happen to anyone, anywhere, at any time.

Epilepsy is the third most common neurological disorder in the United States after Alzheimer's and stroke. Epilepsy has many possible causes, including brain injury and genetic disorders. In many cases, the cause is unknown. Epilepsy strikes most often among the very young and the very old, although anyone can get it at any age. In the U.S., it affects more than 326,000 children under the age of 15; more than 900,000 of whom have seizures that cannot be adequately treated. More than 570,000 adults—ages 65 and above—have the condition.

2. Don't put something in the mouth of a person having a seizure.

A common myth about epilepsy is that a person having a seizure is trying to swallow their tongue. This is not only false, it is medically impossible. So, never put something in the mouth of a person having a seizure. Instead, turn the person gently on one side to make breathing easier and prevent choking. Put something flat and soft under the person's head to prevent injury. Seizures usually last from a few seconds to a couple of minutes. If a seizure lasts longer than 5 minutes, or the person has many seizures and does not wake up between them, seek emergency medical attention.

3. Epilepsy is not contagious.

People with epilepsy are just like everyone else. They deserve respect and to experience as many of the opportunities that life can bring. There is no reason to avoid people with epilepsy; the condition is not contagious—you can't catch it. There is no reason to be shy around people with epilepsy. Since anyone, anywhere, at any time can have epilepsy, you may be friends with someone who has experienced seizures, you might work with someone who has epilepsy—and that's ok.

4. Not all seizures are alike.

There are many different types of seizures. A seizure is a temporary disruption in the brain caused by abnormal electrical activity. People often picture a person having a seizure as shaking rapidly and uncontrollably. However, not all seizures cause convulsions. Seizures fall into two main groups, partial seizures, which originate in just one part of the brain, and primary generalized seizures that begin in both sides of the brain. Sometimes the only sign a person is having an absence seizure—a type of primary generalized seizure—is rapid blinking or staring into space. A person having a complex partial seizure may appear confused or dazed and might not be able to respond to questions for up to a few minutes. A generalized tonic-clonic seizure—the type most people probably think of—may cause convulsions, falling to the ground or loss of consciousness. Most seizures are over quickly and do not cause lasting harm.

5. Don't settle.

The objective of epilepsy treatment is to achieve complete control of seizures. Someone who is experiencing seizures and is not happy with their quality of life, due to medication side effects or ongoing seizures, should seek out new and different treatments for epilepsy. One of the best things a person with epilepsy can do is seek out a neurologist who specializes in epilepsy—often called an epileptologist—who knows enough about the condition to provide the best treatment possible. It is also important for people with epilepsy to know their medications—what they look like and what their names are. While some patients can safely switch their medications among different formulations of the same antiepileptic medication, the epilepsy foundation recommends that people with epilepsy should consult their physician before any medication substitutions are made by a pharmacist.

Remember: Every day, researchers are actively searching for new and better treatments for epilepsy and to one day find a cure.