# First Aid for Seizures (Epilepsy) — Adults & Children

Seizures can be frightening but most end on their own. The priority is safety: keep the person safe, time the seizure, and call for help if needed. Below are clear, age-aware steps for immediate care, common causes, prevention, and when to seek urgent medical attention.

### **Mhat is a Seizure?**

- A seizure is a sudden, uncontrolled electrical disturbance in the brain causing changes in behaviour, movements, feelings, or consciousness.
- Epilepsy is a condition marked by repeated unprovoked seizures, but not all seizures mean epilepsy.
- Seizures vary widely from brief staring spells to full-body convulsions.



## **X** What NOT to Do

- Do not hold the person down or try to stop convulsions.
- Never put fingers, spoons, or any object into the mouth.
- Do not give food, drink, or medication until fully alert and swallowing is safe.
- Avoid crowding give space and keep bystanders calm.



### Immediate First Aid — General Steps

- Stay calm and protect the person from injury move nearby dangerous objects away.
- Time the seizure: note start time and length.

  Most seizures last less than 2 minutes.
- Gently turn the person onto their side (recovery position) if possible — helps keep airway clear and prevents choking.
- Loosen tight clothing around the neck. Cushion the head with something soft (towel, clothing).
- Do NOT restrain movements or force anything into the mouth — people cannot swallow their tongue.





### When to Call Emergency Services

- If the seizure lasts longer than 5 minutes (status epilepticus) — call emergency services immediately.
- If another seizure starts right after the first, or if seizures happen in a cluster.
- If the person has difficulty breathing or does not regain consciousness after the seizure.
- If the seizure follows a serious head injury, drowning, or drug/alcohol overdose.
- If it's the person's first-ever seizure seek urgent medical evaluation.

### **Causes & Common Symptoms**

Causes can be different for children and adults. Knowing triggers and warning signs helps prevention and early help.

## 🔑 <u>Common Causes</u>

- Epilepsy (unknown or genetic causes)
- Fever-related seizures (febrile seizures) most common in young children
- Head injury, stroke, brain infections (meningitis, encephalitis)
- Low blood sugar, severe alcohol withdrawal, or overdose of drugs/medications
- Sleep deprivation, flashing lights (photosensitive epilepsy), or metabolic disturbances



### **Symptoms of Seizure**



# Symptoms to Watch For

- Sudden staring spell, unresponsiveness, or confusion
- Convulsions rhythmic jerking of arms and legs
- Loss of awareness or consciousness
- Strange sensations (tingling, déjà vu), visual or auditory changes
- Sudden falls, limpness, or brief pauses in activity (especially in children)

### **Children & Prevention**

Special considerations for children, especially for febrile seizures and safety at home.

# • Febrile Seizures (Children)

- Common in infants and young children with high fevers (usually 6 months–5 years).
- Most febrile seizures are short and do not cause long-term harm, but always seek medical advice after the first episode.
- Managing fever follow age-appropriate feverreduction measures and see a doctor if fever is very high or child is unwell.





# **Prevention & Safety Tips**

- Ensure adherence to prescribed anti-seizure medications and regular follow-ups with neurologist.
- Maintain regular sleep, stress management, and avoid seizure triggers when known (flashing lights, missing meds, alcohol).
- Use protective measures: supervise water activities, consider helmets for people with frequent falls, and childproof the home.

# 🌄 <u>Treatment & Follow-Up</u>

Medical and supportive steps after a seizure — medication, investigations, and long-term care.



### Medical Treatment

- Anti-seizure medications (AEDs) may be prescribed based on seizure type and cause taken regularly under clinician supervision.
- In some cases, surgery, dietary therapy (e.g., ketogenic diet), or neurostimulation may be options for drug-resistant epilepsy.
- Investigations (EEG, brain imaging) help define cause and guide therapy — follow your neurologist's plan.

### **Aftercare & When to See a Doctor**

- See a doctor after a first seizure, or if seizures change in frequency/severity.
- If there are signs of injury, prolonged confusion, fever, or repeated seizures seek urgent care.
- Discuss driving, work, school activities, and safety planning with your healthcare provider.

# **One of the Community o**

Work with your healthcare team to prepare a written seizure action plan with emergency contact numbers, medication list, usual seizure patterns, and clear first-aid steps — share it with family, school, or caregivers.