

What treatments are used for FND?

Treatment differs from person to person and for some, having access to the right diagnosis with good quality information is enough to improve the FS.

Since physical and emotional stresses are often involved in FS, psychological therapy can be helpful to address this.

A wide range of psychological treatments are available and are effective in reducing the number of seizures, in many cases leading to a full recovery.

Anti-convulsant medications often used for epileptic seizures are **not** effective for FS.

Additional resources

You are not alone in having FS. There are organisations that can support and help you understand this better. These include:

Non-Epileptic Attacks

For patients with functional seizures.
www.nonepilepticattacks.info

FND Hope

International patient led charity.
www.fndhope.org

NeuroSymptoms

FND Information for patients and professionals.
Includes symptoms, treatment and frequently asked questions (FAQs).
www.neurosymbols.org



Patient Information Leaflet

Functional (Dissociative) Seizures (FS)



Please speak to a member of staff if you need this leaflet
in large print, braille, audio or another language

Introduction

This leaflet has been designed to help you understand Functional (Dissociative) Seizures (FS), sometimes referred to as Non-Epileptic Attack Disorder (NEAD) or Psychogenic Non-Epileptic Seizures (PNES). If after reading the leaflet you have any further queries, please speak to one of the team.

Functional (Dissociative) Seizures and how they differ from epileptic seizures

Functional seizures (FS) can look like epilepsy or syncope (fainting) but the underlying process which causes FS happens through a process called 'dissociation'. Epileptic seizures are different and are associated with sudden changes in electrical activity in the brain.

Functional seizures are also part of a broader set of symptoms called Functional Neurological Disorder (FND). Some people with FND only experience seizures while other people with FND experience difficulty with movement, vision, perception, and a variety of thinking skills, including memory.

Does it mean my brain is damaged?

No, it just means that your brain and nervous system do not work properly together. This is because there is a problem with the signals between brain and body, rather than it being brain damage. FS can be frightening and may last for a long time, however, there is no permanent brain damage and it can be treated effectively.

What causes FS?

The cause of FS is not known, however, there are several factors that can contribute to it and this can vary from person to person. These include physical (past illnesses, injuries, fatigue, and pain) and emotional (everyday worries, stress, difficult life experiences, and how we process emotions) factors.

How is FS diagnosed?

An assessment is carried out by an expert neurologist and their team to confirm if you have FS.

Your test results are likely to come back normal because there is no damage to your brain however this does enable other conditions to be ruled out such as epilepsy. This does not mean the symptoms are not real.

Some patients may receive a diagnosis of epilepsy at first because FS look like epileptic seizures. Over time as you and your clinician learn more about the seizures, it may become clear that the seizures are functional seizures. If this happens, your neurologist will support you to change to a more effective form of treatment.

Can I have Functional and Epileptic Seizures?

Yes, some patients will experience both functional and epileptic seizures and therefore a combination of treatments might be needed.