

### What is Epilepsy?

Epilepsy is a nervous system condition that causes electrical signals in the brain to misfire. These disruptions cause temporary communication problems between nerve cells, leading to seizures. One seizure is not considered epilepsy. Children with epilepsy have many seizures over a period of time. Seizures can affect how the child moves, thinks or feels. The two main categories of seizures are:

- Generalized seizures, which involve the whole brain
- Partial seizures, which involve only part of the brain.

Some people with epilepsy have both types. During a seizure, a child may lose consciousness or jerk or thrash violently. Milder seizures may leave a child confused or unaware of his or her surroundings. Some seizures are harder to identify—a child may simply blink or stare into space for a moment before going back to normal activity.

## Treatment For Epilepsy

Many children can be successfully treated with medication. Sometimes surgery is needed to remove the affected part of the brain. Other treatments can be used for epilepsy patients that do not respond to medications, such as ketogenic diet. This diet is high in protein and fat but low in carbohydrates. It can be very successful in helping to manage seizures.

# How can Epilepsy Affect School Performance?

Children with Epilepsy are at risk of poor academic functioning because of the following:

- Learning disabilities children with Epilepsy are three times more likely to have a learning disability than children in the general population
- Processing/memory/attention/concentration problems due to the seizures or as a result of medication
- Loss of school time because of seizures or medical tests/treatment
- Social withdrawal or isolation
- Poorself-esteem
- Behavioral impairment, which is often a side effect of some medications
- Anxiety about having a seizure at school
- May be drowsy or hyperactive due to medication
- Feelings of confusion and disruption following a seizure



## How can schools assist students with Epilepsy?

#### Academic:

- Start academic interventions right away under one of two laws: IDEA (Other Health Impairment) or Section 504
- Provide assessment to target academic needs and provide useful accommodations and modifications
- Allow extra time to complete class work or projects
- Assign a moderate work load that emphasizes quality vs. quantity
- Provide the student with an organizational checklist for routine activities, materials needed and steps to follow to assist with planning and structure of the school day
- Because children with seizures may have difficulty with transitions, build predictability and routine into the classroom environment
- Provide instruction targeting more than one learning style to assist with memory problems
- Provide recorded information, highlighted textbooks and practice with recall skills
- Use repetition and direct instruction to help with focus and attention, which is weakened even when a child is not having a seizure
- Instructional language should be simple, clear and consistent
- Provide preferential seating to optimize concentration and lessen distractions

#### Social/Emotional

- Provide opportunities for success to elevate low self-esteem
- Reduce emphasis on competition; competitive activities may cause undue stress, leading to simple mistakes -repetitive failure could lead to avoidance of situations, assignments or responsibilities
- Provide counseling to address psychological or social effects of condition
- Behavior intervention plans can be helpful for students with behavioral concerns
- School nurse or hospital personnel can share age appropriate information regarding epilepsy with peers with parental consent

#### Physical

- Closely monitor student during P.E./recess to ensure safety
- Provide appropriate safety equipment for P.E./recess such as helmets, padding, life vests, etc.
- Encourage the use of the buddy system during field trips or recess
- Allow for an opportunity to rest after a seizure, if necessary
- Provide breaks in the day for the administration of medication, if necessary
- Provide regular communication to the parent/guardian
- Have school nurse provide seizure response training to school staff who work with the student
- Utilize the buddy system in the classroom and hallways so that an adult can be notified if a seizure occurs

Resources

www.kidshealth.org www.epilepsynl.co

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Growing Up With Epilepsy by Lynn Bennett Blackburn American Epilepsy Society – www.aesnet.org Epilepsy Foundation of America – www.epilepsyfoundation.org School Services Department

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