

Seizure Disorders



There are more than 20 seizure disorders, which are brought on by hyperactivity in the brain. Seizures may be as subtle as a stare or a sudden change in awareness, or as physical as a convulsion. These seizures may last from a few seconds to several minutes. When seizures take place, there can be disruptions of any of the other functions controlled by the brain, from thoughts and emotions to functioning of the heart and lungs. Some seizure disorders experienced by children are difficult to control while others are well-regulated by medication. Medications will not cure a seizure disorder, but may help to control it.

Implications for Planning and Awareness

- Meet with the student and parents early in the school year to discuss how the school can support this student's needs related to seizure disorders. This could include finding out about:
 - the student's strengths, interests and areas of need
 - the student's specific symptoms
 - common triggers that need to be considered at school
 - any other associated disorders that need to be considered at school
 - successful strategies used at home or in the community that also could be used at school.
- In collaboration with parents and health care professionals, develop a written management plan that aligns with related jurisdictional policies and protocols. This should include specific information, such as:
 - the role of school staff
 - when and what emergency measures should be taken.
- If the student is taking medication during the school day, discuss with the parents possible side effects. Follow school and/or jurisdictional policies and protocols in storing and administering medication.
- Collaborate with the parents and student to consider if, and how, they would like to share specific information about seizure disorders with peers. If they wish to do this, consultation with health care providers, such as school or community health nurses, may be helpful.
- Learn as much as you can about how this condition may affect learning and social and emotional well-being. Reading, asking questions and talking to qualified professionals will build your understanding and help you make decisions to support the student's success at school.
- Develop a system for sharing information with relevant staff members about the student's condition and successful strategies.

Your awareness needs to begin with conversations with the student's parents.



Implications for Instruction

- Recognize that after a seizure the student may need a little extra time to begin working up to speed again. He or she may be sleepy and have temporary difficulty concentrating or speaking. Adjust the in-class workload and expectations, as needed.
- Be aware that students, who have prolonged seizures or an episode of frequent seizures, may experience a deterioration of physical and mental abilities, such as balance, speech and language and eye–hand coordination. Inform parents of any changes you see.
- Identify and take steps to reduce common triggers in the school environment. For example, for some students, seizures can be triggered by flashing or flickering lights or patterns, including computer screens.

Implications for Social and Emotional Well-being

- Support the development of self-advocacy skills, such as asking the student for what he or she needs. When possible, involve the student in monitoring the success of supports and strategies used in the classroom.
- Monitor the student for feelings of anxiety, withdrawal and isolation and, in consultation with the parents and student, determine if specific strategies or supports need to be in place.
- Engage the student and parents in planning for transitions between grade levels and different schools.
- Consider a buddy system to support a student with seizure disorders. If the student is returning to class after a seizure, the buddy can help out with missed work.
- Make adjustments to social activities, as necessary, to allow students with seizure disorders to participate safely.
- Provide a comfortable and private area for the student to relax or sleep after a seizure.

Parents know their children well and can offer insights on how to support their social and emotional well-being. There is strength in collaborating on strategies that could be used at home, at school and in the community.



As you consider the implications for this medical condition, think about the following questions:

1. Do I need further conversations with the parents to better understand this student's medical needs? Yes No
2. Do I need targeted professional learning?
If yes, what specific topics and strategies would I explore? Yes No
3. Is consultation with jurisdictional staff required?
If yes, what issues and questions would we explore? Yes No
4. Is consultation with external service providers required (e.g., Student Health Partnership, Alberta Children's Hospital, Glenrose Hospital)?
If yes, what issues and questions would we explore? Yes No

Links for further information:

Epilepsy Ontario. At Work & School. <http://epilepsyontario.org/at-work-school/>
BC Epilepsy Society. "Understanding Students with Epilepsy: Tips for Teachers."
http://www.bcepilepsy.com/files/information-sheets/Understanding_Students_with_Epilepsy_-_Tips_for_Teachers.pdf

Please note:

These websites are for information only and the user is responsible for evaluating the content and appropriate uses of the information.

