

Fact Sheet 20

How to help a student with epilepsy

- 1 in 100 people has epilepsy.
- Anyone can develop epilepsy at any stage of their lives.
- Epilepsy is a sudden, unprovoked, recurrent burst of electrical activity within the brain, which produces a seizure.
- There are many types of seizures. Some seizures last only for a few seconds whilst others may last for minutes.
- Sometimes it is difficult to recognize the difference between a seizure and unusual behaviour

See fact sheet #1 “[What is epilepsy](#)” and fact sheet #2 “[Epilepsy Types](#)” for more information.

Seizures take many forms

Focal

- Purposeless actions such as lip smacking, chewing, fiddling at clothes
- Wandering off without apparent awareness
- Repeated unnatural movements, e.g. cycling action
- Sudden stomach pain or feeling unwell
- Smell/taste/visual/sound disturbances
- Sudden fear/anxiety /anger or panic attacks
- Loss of awareness
- Experiencing déjà vu, hallucinations

If you notice any unusual behaviour in a student, record your observations and report them to your school nurse or school principal. Follow the school procedures for reporting to parents.

Generalised

- Blank stare lasting seconds. It looks like a daydream
- Rapid eye blinking
- Rhythmic head nodding
- A sudden fall without a reason
- Repeated jerking movements of the arm, legs and/or body
- Convulsing
- Incontinence

To help a student with epilepsy, a teacher should know how to make them safe during a:

Non-convulsive seizure

- Act calmly
- Reassure the person
- Stay with him/her until he/she recovers

Convulsive seizure

- Keep calm
- Note time
- Make area safe
- Support head
- Do not put anything in the mouth
- Do not restrain the person
- Put person in recovery position after seizure finishes
- Stay with the person until she/

If a person recovers from the seizure:

- Stay with him/her until full consciousness returns
- Offer reassurance, comfort and support. He/she may be confused and tired
- He/she may need to go to the toilet or have a change of clothing should he/she have become incontinent
- Allow him/her to rest or have a sleep. He/she may wish to go home to recover
- Calmly explain to the class what has happened
- Resume class work. The person who had the seizure will need to be re-instructed

Phone 111 if the seizure:

- Lasts more than 5 minutes
- Follows one after another without full recovery
- Is in water
- Is the first one
- If the person is pregnant or has diabetes
- If a person has been injured
- If consciousness or breathing do not return to normal

View factsheet #4 on what to do if someone is having a convulsive seizure for more information.

A free EWCT seizure diary will help with recording seizures, understanding possible triggers, and provide important information regarding taking medications - contact maria@ewct.org.nz to obtain a diary

Students with epilepsy have a wide range of learning abilities. Epilepsy does not necessarily hinder learning and skill development but many with the condition do experience learning issues which may include motor skills or cognitive functions, as well as a difficulty acquiring new skills or knowledge.

Anti-epileptic drugs (AEDs) are commonly used for treating epilepsy and for most people they are generally well tolerated. However, all AEDs have a list of possible unwanted side effects. These include, for example, rashes, behavioural changes, swollen gums, acne, feeling drowsy/tired/fatigued, experiencing weight changes, feeling moody, nauseous or having problems with how the brain works. These side effects can be minor or severe, or long lasting and potentially irreversible. As a result of taking AEDs some people experience issues with memory and concentration and they can find it difficult to learn and store new information. This is because AEDs can interfere with the speed in which the brain can process information.

The seizures themselves may also have an effect on a person's ability to learn. People with the condition are often tired after a seizure, which in turn affects memory and concentration. A seizure also disrupts memory functioning processes. Memories before a seizure can be lost, because they are not fully incorporated into the memory system, and then the loss of consciousness further disrupts the encoding and storage of information. On recovery from a seizure, the confusion that follows further prevents memory from working properly. The type of memory impairment depends on where the seizures originate in the brain.

View fact sheet #15 on [epilepsy and memory](#) and fact sheet #3 "[The brain](#)" for more information.

To help a student with epilepsy the teacher should consider the social and emotional needs as follows:

1) Meeting with the student and parent to discuss, in detail, the student's epilepsy, i.e. seizure description, first aid instructions, medication, and triggers. Ensure that the student is in partnership in the management of their epilepsy and that he/she takes responsibility for it. (The EWCT epilepsy advisor could be involved in producing an easy-to-follow individualized epilepsy action plan for the family and school.)

See fact sheet #12 on [risk management planning for teachers](#) for more information.

In many cases, seizures are only a temporary interruption in a student's life, and so positive interactions are important. It is entirely up to the student and parents to decide whether or not to disclose the student's epilepsy condition to classmates.

2) Encouraging a 'buddy' system to operate within the classroom/school to prevent the student with epilepsy from feeling socially isolated. He/she should be encouraged to fully participate in all school activities, including most sports. A risk management plan is necessary to give confidence to the teacher and classmates in supporting the person with epilepsy.

Treat the student as the same as everyone else and avoid negative comments and actions that would discourage generally full participation at school. Overprotecting a student is unhelpful and it may lead to unnecessarily denying a person the opportunities that would normally be afforded to him/her.

See fact sheet 10 "[Be empowered](#)" for more information.

3) Educating the classmates about the epilepsy condition and explain how to help someone during a seizure. Epilepsy is still a misunderstood condition, and stigmas and prejudice are still present in schools and communities at large. This negative perception is detrimental to the psychological wellbeing of students with epilepsy and can have life-long psychological ramifications for them. Any emotional stress can lead to more seizures, which could mean absenteeism from school.

4) Identifying behavioural changes that could indicate a side effect from AEDs or a mood change leading to depression, poor self-esteem, and anxiety. Since epilepsy is an unpredictable episodic event, many students may feel embarrassed, angry, or anxious about having epilepsy and these emotions need to be addressed in order to avoid developing mental health issues

Teachers could help students with epilepsy by recognizing and understanding learning challenges by:

1) Understanding that stress is a well-known seizure trigger. Exams, tests, and deadlines may precipitate more seizures in a student with epilepsy. Please allow extra time for the student to finish an exam or test and, if necessary, provide a separate room for him/her to use. A reader/writer should be offered for those with processing difficulties.

2) Recognise that seizures and medications can cause memory and concentration issues. Put in place strategies to help aid in encoding, storing, and retrieving information.

- Eliminate distractions
- Give a short set of instructions that are clearly understood by the student
- Be prepared to re-instruct during a lesson
- Allow for processing time
- Give the student notes to use instead of having him/her copy from a whiteboard
- Revise new information daily
- Teach basic study skills such as highlighting, paraphrasing, outlining, and summarizing
- Encourage the use of organisational aids such as preparing lists, timetables, diaries
- Simplify tasks
- Use diagrams, graphs, and pictures
- Provide frequent feedback
- Provide additional time to complete work
- One-on-one instruction
- Provide extra tuition
- Create a supportive environment to enhance the student's learning potential
- Positively help a child, absent with seizures, by providing notes for him/her

The rights of a student with epilepsy

The right to an education is a fundamental human right and students cannot be excluded or treated less favourably because of epilepsy. They have the right to feel safe, physically and emotionally, and reasonable care should be taken to ensure that they are not disadvantaged by their disability.

Laws protecting young people in New Zealand

- United Nations Convention on the Rights of the Child
- New Zealand Bill of Rights Act 1990
- Human Rights Act 1993
- Children, Young persons and their Families Act 1989
- Education Act 1989

Disclaimer: this fact sheet is for education purposes only. Please consult your doctor or other health professional for advice regarding your epilepsy.