

Staying safe with epilepsy

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Let's talk



How to use this guide

Living with epilepsy is so much more than seizures. Safety is a major concern for anyone affected by epilepsy, their families and carers. If you or someone you look after has been diagnosed with epilepsy, the following information may help identify, assess and minimise possible risks.

Please note, this factsheet is meant as general guidance only. Every person's circumstances and needs are unique and need to be taken into account when assessing risks and benefits of activities and daily living. If you have good seizure control, a lot of the following information may not be relevant to your situation. You also may wish to refer to a specialist health service such as your epilepsy specialist nurse, occupational therapist or health visitor for specific advice and guidance.

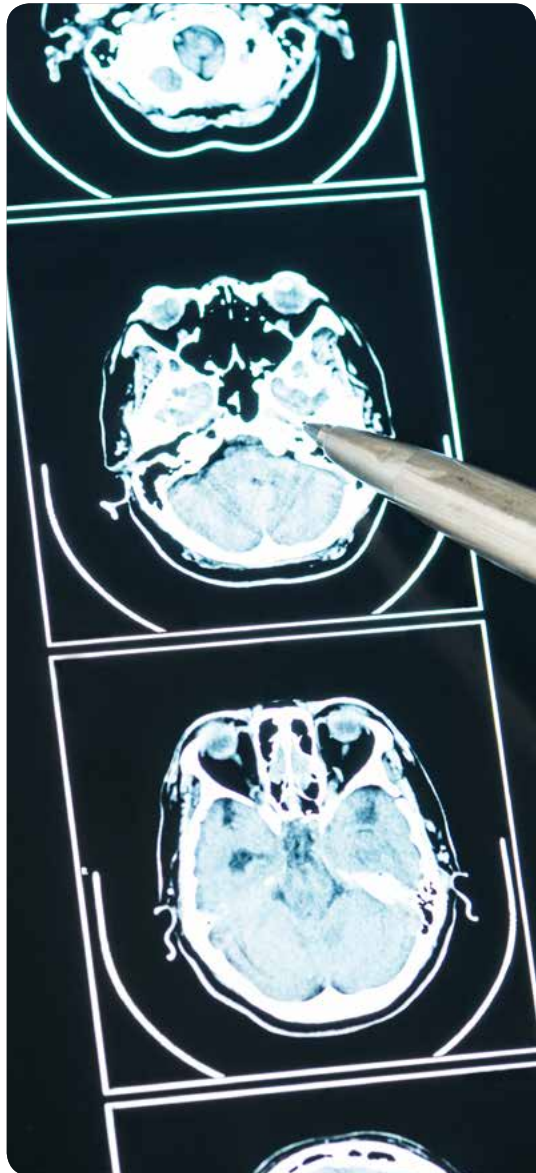


What is epilepsy?

Epilepsy is a common and serious neurological condition. **One in 97** people have epilepsy, that is **55,000 people in Scotland**. Anyone can develop epilepsy at any age, however, it is more common in childhood, teenage years and later life. Epilepsy is also more common in people with a learning disability.

Generally, epilepsy is defined as having more than one seizure. These seizures start in the brain and are caused by disturbances in the brain's electrical activity.

Having one seizure does not necessarily mean a person has epilepsy. Around **one in 20 people will have a seizure during their life, which could be due to a high temperature or infection.**



How can I identify risks?

Between **60-70% of people can have their seizures prevented by anti-epileptic drugs (AEDs)**. With good seizure control, there will usually be no need for restrictions and precautions for this group other than taking medication every day and staying mindful of possible seizure triggers. These could be lack of sleep, stress or anxiety.

Everyone, not just those with epilepsy, faces risks

in their home and when out and about. These risks can be higher for someone with epilepsy whose seizures are not controlled by medication, particularly if the person also has other health conditions and / or complex needs.

Assessing epilepsy alone, the level of risk depends on the frequency of seizures, the type of seizures a person has, whether there are any triggers, and whether they get a warning before a seizure.



How can I identify risks?

If seizures are rare, only a few extra precautions may be necessary. However, if seizures are not well controlled, particularly if the person has additional health conditions or complex needs, a risk assessment may be needed to help minimise risks of injury. This can be done by the person's care provider, if they have one, with input from specialist health services.

How long does the person usually take to fully recover from a seizure?

How often do seizures occur?



When do seizures usually occur? Is there a pattern?

What type of seizures are they? What do they look like?

Does the person have any triggers for their seizures?

Does the person lose consciousness during a seizure and / or suddenly fall down?



Does the person get a warning before a seizure?

Does the person have a history of prolonged or serial seizures?

Keeping it in perspective

It can be difficult and upsetting being faced with sudden restrictions, but it may help to bear in mind that for many people some of these restrictions may only be temporary until better seizure control is achieved.

Once specific risks are identified there may be a number of ways to minimise these. Depending on individual circumstances, many people can carry on with their life, going out, socialising or exercising.

In fact, staying active has many health benefits and some evidence suggests that a level of exercise can also be helpful with seizure control. Maintaining relationships and connections with friends and family can also help with adjusting after a diagnosis.



Who can assess risks?

In many cases, a simple risk assessment can be done by the person or their family/ carers using this guide. If a health professional is involved, they may be able to provide further specific information on certain risks.

Local social work departments can carry out formal assessments called a 'community care assessment' for adults, or a 'section 23 assessment' for a child. Health and social work services may arrange for an occupational therapist to visit the home for an assessment.

Social work may also look at any support and help which may be needed. This could be help with meals, respite care, aids and equipment, allowances and benefits, or home carers and day services.

Special products, devices or aids

Special products and devices, as well as adaptations can often make life with epilepsy easier and safer. Health and social work staff can advise on what is available and where to get these from.

Social work departments may provide funding for adaptations and special products if they are recommended as part of a community care assessment (or section 23 assessment for children).

Other charities and organisations can help with sourcing special products or signposting to anyone who may be able to help with funding. These include:

- ★ The Disabled Living Foundation www.dlf.org.uk with an extensive online directory of specialist products and where to get them from

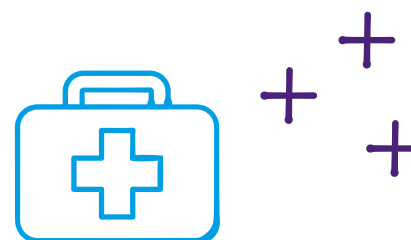
- ★ The Family Fund www.familyfund.org.uk who provide funding for special equipment or adaptations for children under 17
- ★ Turn2Us www.turn2us.org.uk can do a funder's search across the UK
- ★ For all disability related information and resources in Scotland, check out Disability Information Scotland www.disabilityscot.org.uk



Familiarise yourself with first aid for seizures

Knowing what to do if someone has a seizure will help keep them safe during and after a seizure. Families and carers should speak to the person's epilepsy specialist nurse or any other health professional, and familiarise themselves in advance with what to do:

- ★ if the person is unconscious
- ★ if the person has injured themselves and / or is bleeding
- ★ if the person has something stuck in their throat
- ★ if the person has difficulty breathing or if they stop breathing
- ★ and when to call an ambulance



If in doubt or concerned, or **in an emergency, always dial 999** or contact **NHS24 on 111** (outside GPs' opening hours). Our '**First aid for seizures**' factsheet also provides general details on first aid for different types of seizures, when to call an ambulance and further information on medical emergencies.

If a person has prolonged seizures, they may need emergency medication to stop them. A GP or epilepsy specialist nurse will prepare a care plan which will record details of how much emergency medication to give, under what circumstances, and who can administer it.

If you want to find out about training on the administration of emergency medication, your epilepsy specialist nurse or Epilepsy Scotland can help.

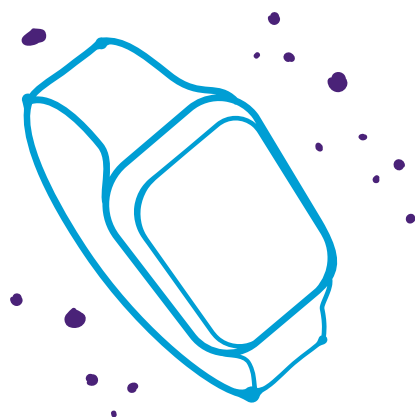
Alarms

Epilepsy alarms may be able to alert others in the home if the person has a seizure, particularly when asleep. This may help to keep the person safe during and after a seizure. Alarms may provide additional peace of mind and reassurance to parents / carers, but it is important to understand that alarms are not 100% effective, and will not always pick up on genuine seizures and / or may trigger a false alarm.

There are many different types of alarms, such as bed alarms, alarms that detect a fall, or alarms that monitor vital signs such as heart rate. Some of these can be connected to an existing community care alarm and can dial a telephone number when the alarm is triggered. Depending on the type of alarm, they can detect movement, sound or moisture in the bed.

Our **'Epilepsy alarms'** factsheet provides an overview of the different types of alarms and details of some of the suppliers.

Social work departments may be able to fund and install an alarm following a community care assessment (or section 23 assessment for a child). Funding for an epilepsy alarm for a child under 17 may also be available from the Family Fund www.familyfund.org.uk. Some charities will provide an epilepsy monitor for free, contact us for more details.



Protective helmets

These are usually only necessary if a person has frequent seizures increasing the risk of a head injury. Most people will purchase a rugby or baseball style hat which can offer some protection against injury. There are some epilepsy specific helmets which can either be custom made or purchased. Before you purchase any type of helmet, make sure this is suitable for

the type of seizures you or the person you care for has. For example, if a person tends to suddenly fall forward during a seizure, they may need a helmet with a face guard.

It is usually the responsibility of the individual to purchase these helmets privately. You may also be able to apply for money from a trust, particularly if the helmet is for a child.



Bathroom

Having a shower in general is safer than a bath as it reduces the risk of drowning. However, a detailed assessment needs to be carried out first weighing up risks and benefits of a shower or a bath, looking at individual needs, and what kind of supervision, support and adaptations are available before making a decision.

For some people, especially those with a learning disability and / or other complex needs, having a bath often meets a sensory need, and this needs to be taken into account as well in the overall assessment.



Staying safe in the shower

- ✦ Depending on need, supervision may be required
- ✦ The shower should have a flat floor (level access shower). If there is a lip, it needs to be as low as possible to avoid any water being trapped
- ✦ Depending on the type of seizures, it may be safer to sit down when showering
- ✦ If the person has an over the bath shower, it is recommended to remove the bath plug or anything that could accidentally block the outflow of water. This is a general precaution but would not always prevent a person accidentally blocking the outflow of water with parts of their body during a seizure. Specialist health services can advise further on what equipment or adaptations

may be available to prevent accidental drowning

- ✦ A fabric shower curtain or plastic shower screen is safer than glass. If it is glass, it should be safety glass
- ✦ The water temperature control needs to be in full working order. **Never use very hot water.** Some controls have a safety-cut off to avoid scalding
- ✦ A slip resistant mat in the shower can prevent further injury during a seizure



Bathing

- ✦ If there is no shower, it would be advisable to only take a bath if someone else is with the person with epilepsy at all times. This means being physically present in the bathroom. If unsure, please seek advice from a specialist health service
- ✦ Bathing may need to be minimised or avoided at times when seizures are more likely, for example if the person is going through a medication change, or if other triggers are present such as feeling unwell
- ✦ Individual circumstances will determine what level of supervision and equipment may be required to prevent accidental drowning. For example, the person supervising must be physically capable to hold

Bathroom

the person's head above water and keep them safe until the water has drained and / or the seizure has stopped. A specialist health service can provide further guidance to ensure risks are minimised and individual needs are met

- ✦ Be mindful of the depth of water when seated. In general only a shallow bath should be taken unless sufficient precautions and measures are in place to stop immersion of the face during a seizure
- ✦ All taps should be turned off before the person enters the bath. Avoid topping up with water, especially hot water, as this can present a further risk of scalding. If you do top up, please keep the water to the same shallow level

- ✦ If you decide, weighing up risks and benefits, to take a bath on your own, be aware that it only takes a few inches to drown. If you wash yourself in the bath with the plug removed so the water can freely drain off, be aware that your body may still block the outflow of water during a seizure

- ✦ When taking a bath, a mixer tap should be used. If this is not available, it is strongly recommended to have one installed. Alternatively, a shower fitting to both taps in the bath tub can be attached. Caution needs to be exercised though as this could be pulled off during a seizure increasing the risk of scalding and entanglement

- ✦ Avoid using very hot water

Other safety tips for the bathroom

- ✦ Bathroom fittings should be flush to the wall. If the fittings stick out, they need to be covered with protective material. A thick towel can also be wrapped around the fittings to cushion them
- ✦ Plastic containers for toiletries are safer than those made of glass
- ✦ An electric shaver is safer than ordinary razors
- ✦ Floor tiles made of rubber or other soft material, and slip

resistant flooring may help prevent falls during a seizure

- ✦ The bathroom door can be hung in such a way so that it opens outwards. This may prevent the door being blocked if someone has a seizure in the bathroom
- ✦ The bathroom door should never be locked. An 'Engaged' sign on the outside door can provide a level of privacy. Alternatively, special safety locks allow a door to be unlocked from the outside in an emergency



Bedroom

Low level beds or a futon reduce the risk of injury if you or the person you care for falls out of bed during a seizure. Sleeping in the middle of a large bed or placing the bed against one or two walls can also reduce this risk.

You may also want to consider placing some type of cushioning or crash mats next the bed to minimise the risk of injury if you / the person you care for falls out of bed during a seizure. Be mindful though that this could also pose a trip hazard.

Furniture with sharp edges should be kept away from the bedside if seizures are not well controlled.

Safety pillows

Soft pillows can be dangerous if a seizure occurs while the person is asleep as the person could suffocate if they end up face down after a seizure. Safety pillows which have small holes may help reduce the risk of suffocation as these holes will allow for continued breathing even when lying face down.

Switching to firm foam pillows can also reduce the risk of suffocation. Some people prefer to sleep without a pillow at all.



Flooring

The risk of injury during a fall may be reduced if floors have soft carpeting or cushioned linoleum rather than rough carpeting or tiles. Slip resistant flooring may also be helpful.

Carpets with a high wool content are better than those with a high synthetic content because they are less likely to cause friction burns during a seizure.



Stairs

If you or someone you care for has frequent seizures without any warning, internal and external stairs can be a major risk of injury. There are, however, ways these risks can be reduced.

Stair gates at an appropriate height may prevent someone from falling down the stairs during a seizure. Depending on types of seizures, a gate not only at the top but also at the bottom of the stairs may help. For example, during a focal seizure with impaired awareness (also known as

complex partial seizure) you or the person you care for may try to climb the stairs which could be prevented by installing a stair gate at the bottom step. Please note that stairgates can also sometimes pose a risk, especially if the gate is too low, as a person may topple over it during a seizure potentially sustaining serious injuries.

Always keep your staircase clear. Something soft at the bottom of the stairs such as a rug or carpet can also cushion a fall and may prevent further serious injury.



Furniture

Creating space and decluttering a home can reduce the risk of injury during a sudden seizure. Sharp furniture edges and corners can be covered over with shaped plastic pieces.

Chairs should have armrests which could prevent the person from falling to the floor during a seizure.

Furniture should be fixed to the wall, if possible.



Glass

Safety glass or toughened panels should be fitted to glass doors or low windows. Any newly built home will already have these fitted, as this is a legal requirement. This type of glass is difficult to break, and it also holds together if broken.

Alternatively, a safety film can be fitted over glass panels in the home. This should stop the glass splintering if a person falls against it during a seizure.

Any mirrors in the house should be made of shatterproof glass or, if possible, hung up high and out of reach to prevent injury during a seizure.



Heating



Open fires

Open fires require a solid fireguard which is securely fixed to a wall or floorboards to stop it from toppling over during a seizure.

Radiators

Radiators should be fixed to the wall or floor as they are safer than light-weight free-standing heaters, which can be knocked over during a seizure. Consider keeping radiators on low heat to avoid burn injuries. Alternatively, use a radiator guard to stop you or someone you care for falling against a hot radiator during a seizure.

If there are any hot pipes exposed in the kitchen or bathroom, these should be wrapped in some kind of insulating material.

Kitchen

Gas or electric cooker

Having a seizure while using a gas or electric cooker can be dangerous. A safety guard fitted around the front of the cooker may prevent accidental burns from touching rings or burners.

When cooking, pot handles should be turned in, ie away from the edge, so they cannot be knocked over during a seizure. Using the back rings or burner rather than the front ones may prevent further accidents and injury during cooking.

Using a toaster is safer than grilling toast, but generally grilling is safer than frying or boiling.

Microwave

A microwave oven can be a safer alternative to a cooker. It does not get hot on the outside and switches off automatically when the cooking time ends. This reduces the risk of a fire or food burning if left unattended.

Special microwave proof dishes do not get too hot. This further reduces the risk of a burn injury.

Carrying hot food and drink

When serving food or drink, take the plate or cup to the saucepan or kettle rather than vice versa. Alternatively, use a trolley for transferring food and dishes from the oven to the table and back.

A cup with a plastic lid can protect from hot spills during a seizure.

Kettle

Use a cordless kettle which automatically switches off. Some have a hinged lid which locks shut when switched on, which can help prevent accidents. Using a kettle tipper (and teapot pourer) also does away with the need to lift a heavy container full of hot liquid.

Other kitchen safety tips

- ✦ A food processor is safer than using a knife
- ✦ Unbreakable dishes can reduce injury risks
- ✦ Rubber gloves worn during washing-up may give some protection against cuts and scalds



Home improvements

Depending on the type of DIY job, and the type and frequency of seizures, it might be safer for you to do this when not alone. Generally, if seizures are uncontrolled and sudden, avoid using power tools, ladders or working at heights. A fall from height could result in a serious injury. There is more information on working safer with power tools in the next section.

Avoid any such activities during those times you may be more vulnerable to seizures. This could be during times when there are changes to your medication, when you are not feeling well, when you experience problems with sleeping, when you are stressed or during any other situations that may make it more likely to have a seizure.



Electrical appliances

Trailing flexes

Any electrical appliance with a trailing flex is potentially dangerous. If pulled over during a seizure, the appliance could cause a fire or cause injury. One way to reduce this risk is by using cable tidies.

Iron

Using a tumble dryer can cut down on the amount of ironing. A cordless iron, which automatically switches off after a set time if not in use, can prevent injury or fire.



Restrict ironing if possible, particularly if you have the type of seizures with an impaired level of awareness, as this could lead to serious burn injuries. Also be mindful of any seizure warnings you may get and completely avoid ironing during those times when you are more likely to have a seizure.

Power tools

Battery operated power tools are safer than those using mains power as there is no power cord to be damaged during a seizure. Some power tools also have a safety cut-out feature. All mains powered tools should be connected to a circuit breaker on the wall socket. This can protect against the risk of electrocution.

Electric wheelchair

If you or someone you care for uses an electric wheelchair, you need to be mindful of the fact that there may be certain risks depending on the type of seizures. For example, during a focal seizure with impaired awareness (also

known as a complex partial seizure) a person may be in danger of accidentally pushing a button which could steer the person into danger, for example a busy road. In some cases using a manual wheelchair may be safer.



Medication

If there are children in the house, it is important to store medication safely and lock it away.

Special tablet dispensers can help you remember whether you have taken your medication or not. You can buy these from your local pharmacist. This can stop you from accidentally taking too much of your medication or forgetting to take it at all which could trigger a seizure. Websites such as www.tabtime.com or www.dfl.org.uk can help you find the right gadget to help you remember to take your medication.

Anti-epileptic drugs work best and give you the best chance of seizure control if you take them every day exactly as prescribed. The better seizures are controlled, the lower the risk of injury will be. If there is anything that may make it less likely to take the prescribed medication, address this immediately. For example, if you or someone you care for has difficulty with swallowing tablets, discuss this with your specialist nurse, as it may be possible to change the tablets to a liquid formulation.



Televisions and computers

A very small number of people with epilepsy (around three percent) are photosensitive. Anyone who has photosensitive epilepsy can have their seizures triggered by flashing or flickering lights. This could be by watching TV or playing a computer game if the content contains flashing lights or strobe effects.

To reduce risks, consider the following:

- ✦ Modern screen technology such as LED, OLED, LCD or plasma screens are safe as they do not flicker, however, these screens do not protect anyone from the content if they contain flashing / flickering lights or strobe effects
- ✦ Do not sit too close, keep a distance of at least three meters from the TV set
- ✦ Sit level with, not below the TV screen
- ✦ Watch TV in a well-lit room
- ✦ Beware of fast-forwarding or re-winding a programme or film as fast moving patterns can sometimes trigger a seizure
- ✦ If the programme you watch contains flashing or flickering images, quickly cover one eye with one hand. This may sometimes prevent a seizure from starting
- ✦ Programme makers should give you a warning if a programme contains flashing images. This will give you time to switch your TV off
- ✦ Computer and video games may also contain flashing and flickering images. Have someone check out the game first to make sure it does not contain any images that may trigger a seizure

Our '**Photosensitive epilepsy**' factsheet provides further information on what to look out for and how to keep safe.



Smoking

A discarded cigarette during a seizure while in bed or sitting on a sofa can start a fire. Smoke detectors can provide a level of protection, these should be properly fitted and batteries checked at regular intervals. Smoking outside might be a safer option in terms of fire safety.

By law, all new furniture has to be made of fire-resistant fabrics which will stop a fire from spreading too quickly. Make sure that any second hand furniture is also made of fire-resistant fabric.

If you smoke and have a seizure, you could also sustain burn injuries from the lit cigarette. If you are thinking of giving up smoking, your GP can give you details about smoking cessation programmes in your area.



Seizure alert and response dogs

You may be able to apply for an official seizure alert and response dog if you or someone you care for meets the criteria set by those organisations which train and provide assistance dogs. These dogs are trained to sense an impending seizure. They will give a clear warning signal which may give you a chance to sit down or get yourself to a safe place. Seizure alert and response dogs are also trained to stay with you and to help keep you safe during and after a seizure.

If you are interested in getting an official assistance dog, Support Dogs UK, www.support-dogs.org.uk may be able to help. Their current criteria include that you need to be over 16 and have at least ten major seizures per month. They do not train pet dogs.

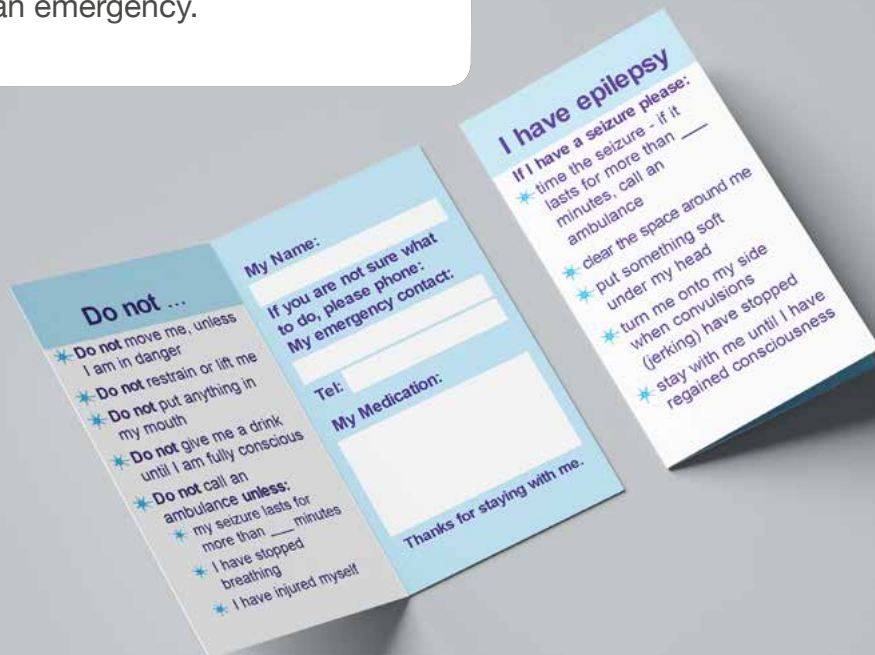
Having a seizure alert and response dog can give you or someone you care for more confidence and independence. Once a dog is registered as an Assistance Dog it is allowed to go with you wherever you go. This includes places that are usually restricted to dogs, such as shops and restaurants.



Medical identification

Medical identification jewellery such as a bracelet or a necklace can allow first responders or paramedics to provide more effective treatment. This can provide useful information on a person's epilepsy such as details of medication, how long seizures normally last and who to contact in an emergency.

Alternatively, Epilepsy Scotland can provide a small '**I have epilepsy card**' with space for similar information such as type of seizures, emergency contact and medication. Contact us for your free copy.



Sport and leisure

Staying active can have beneficial effects on general wellbeing but also seizure control.

If seizures are well controlled, most sports and leisure activities can be enjoyed without any restrictions. There are some types of sport, such as scuba diving or boxing, which can be dangerous even if seizures are well controlled. Generally, caution should be exercised with contact sports if epilepsy was caused by a head injury.

Frequent and unpredictable seizures should not stop anyone from pursuing some leisure activities, but extra precautions may be needed.

Always check with your doctor or epilepsy specialist nurse first before you or someone you care for takes up any sport or leisure activity. Our '**Epilepsy and leisure**' guide has more detailed information on different leisure activities.



Sport and leisure

Cycling and horse riding

Wearing a helmet when cycling or riding a horse is always recommended, with or without epilepsy. However, if a person has epilepsy, a helmet is particularly important to protect further damage to the brain in case of an accident.

Generally, avoid busy and/or public roads when cycling, particularly if seizures are not well controlled. If you use a cycle path, avoid any routes along canals or rivers.

When riding, depending on seizures and other health needs, it might be safer for someone else to walk alongside the horse.

Swimming

As always, risks need to be balanced against potential benefits of swimming. Specialist health services will be able to



provide further specific advice on individual circumstances.

Generally, if seizures are well controlled, or seizure patterns are predictable, the risk may be minimal if swimming takes place in a pool which is supervised by a qualified lifeguard. Always alert the lifeguard if you or the person you care for has epilepsy before going into the pool. All types of seizures have the potential to cause problems.

It can be safer to stay in the shallow end and swim breadths rather than lengths. Avoid busy times of the day if possible. Swimming should be avoided at times when seizures are more likely such as when feeling unwell or when there is a change to medication.

With frequent and unpredictable seizures, particularly if the person

has other health issues, it might be necessary to have another person present in the pool. This person will need to be physically capable of supporting the person during a seizure and keeping their head above water at all times. Using a flotation device can also help keep someone safe during a seizure.

If you want to swim in a loch, river or the sea, you will need to take further precautions. Never swim in open waters during times when seizures are more likely. Always have someone with you at all times, someone who could support and keep you safe during a seizure.



Sport and leisure

Gardening

Outdoor spaces and gardening can be made safer by:

- ★ covering the ground with lawn or bark chippings instead of concrete or gravel which could cause serious injury during a sudden fall
- ★ opting for wooden decking instead of a stone patio
- ★ using a petrol lawn mower instead of an electric mower as this prevents accidentally cutting through the electric cable. Any electric lawn mower should be used with a circuit breaker. A lawn mower which stops automatically when the handle is released can be an additional safety feature



Garden ponds

- ★ If there is a garden pond, this should be fenced off to prevent someone falling in during a seizure. Planting bigger plants and shrubs around the pond can make it more difficult to gain access to the edge of the pond during the type of seizures where a person may wander around aimlessly (ie focal seizure with impaired awareness, also known as complex partial seizure)
- ★ A safety grid that sits just below the surface of the water can also offer a level of protection against drowning. This should always be checked with the manufacturer to ensure the grid is strong enough to hold the person's weight. It needs to be professionally installed. A safety grid should only be one of several measures in place though

Before a new garden pond is installed, consider its position. If it is easily seen, someone might be able to assist quicker if help is needed.



Being a parent / carer with epilepsy

Having epilepsy should not stop anyone from safely looking after a child. If you have a baby or small child you may need to take extra care and precautions depending on the type and frequency of your seizures.

Not getting enough sleep and worrying about your baby can be a source of stress to any new parent. If you have epilepsy, this could increase the risk of seizures.

If you are a new mother with epilepsy, you also need to watch out for hormonal changes and how these may affect your seizure control. You can find more information relevant to women with epilepsy in our '**Women and epilepsy**' factsheet.

Specialist health services will be able to give you advice on how you can look after your baby/toddler as safely as possible.

There are some simple precautions you can take which may reduce risks to yourself or your baby or young child during and after a seizure.

Child gates

If you have a seizure which leaves you unconscious or not fully able to look after your child, you will want to make sure that your child is safe until you recover. Fit a child proof gate at the kitchen door, at the bottom and top of stairs and any other areas you want your child kept away from.



Your garden should be completely fenced in. The gate should be sturdy and have a secure lock. Front door and terrace / balcony door locks should be well out of reach and secure to stop a small child from opening it.

Protecting your child from electric appliances

Use child proof covers for electric sockets. You can buy these online or from shops which specialise in baby or general safety equipment.

When you do your ironing or anything that means using an electric appliance, it can be safer to keep a younger child in a playpen during that time. This would keep your child safe, should you have a seizure, until you recover.

Bathing your child

If you have unpredictable and frequent seizures where you lose consciousness, you should only bathe your child when someone else is at home. When you are on your own simply sponge your child in an empty bath, baby bath or on a waterproof sheet on the floor. Only use a small amount of water in a small bowl, and make sure your child cannot reach this.



Being a parent / carer with epilepsy

Carrying your child

If your seizures are frequent and happen without warning, it is safer not to carry your child in your arms when you are alone. Some parents use a buggy to wheel their baby or toddler around the house.

Breastfeeding your baby

Lack of sleep or disrupted sleep can often trigger seizures in new mothers with epilepsy. If your seizures tend to be triggered through lack of sleep, you can still breastfeed your baby during the day. For night feeds, you can express your breast milk and ask your partner or someone living with you to bottle feed the baby.



This will allow you to catch up on your sleep during the night and reduce the risk of further seizures due to sleep deprivation.

Never breastfeed your baby while you are in your own bed. Never have your baby in bed with you while you are asleep.

Mealtimes

Rather than sitting up at a table, it can be safer to sit on the floor to feed your child. Try to have your back to the wall and a large cushion on either side. During a seizure, your child is less likely to be injured as you are already low to the ground and cushioned on either side. If you tend to fall in the same direction, make sure you hold your baby on the opposite side during bottle feeding. As your child grows older you can set a highchair at its lowest height and feed your child as you sit on the floor.

Nappy changing

Change your baby's nappies sitting down on the floor. That way, should you have a seizure, your baby cannot roll far. To avoid falling on your baby during a seizure kneel down at the side of the changing mat.

Childproofing your medication

Make sure your child cannot reach your anti-epileptic drugs or any other medication in your house. Always securely lock it in a cabinet which your child cannot reach. Pills and tablets are easily mistaken by a small child for sweets. Be extra careful if you carry your pills in a pocket or bag. A child may also want to try to copy a parent taking medication. Take your medication out of your child's sight to avoid your child wanting to copy you. For extra security, get pill dispensers with a childproof cap.

Outside the home

When you take your baby out in a pram or buggy you can tie a toddler strap to your wrist and the pram. This will stop your pram or buggy from running away if you let go of the handle during a seizure. The cord should be long enough that you cannot pull the pram over if you fall. Some prams also have brakes which lock when you let go of the handle.

Keep your toddler on a toddler strap tied to your wrist to stop them from wandering off during a seizure. It also helps if your child carries identification.



Being a parent / carer with epilepsy

Teaching your child to call for help

If your child is slightly older, you can explain more about your epilepsy. We have storybooks for young children which may help start the conversation about your epilepsy. When you think your child is old enough to understand, you can explain to your child how to help you if you have a seizure such as dialling 999.

If you are a single parent, you may want to consider having a community care alarm installed. Your child, if old enough, can be taught to use the alarm and call for help. Your local social work department or epilepsy specialist nurse can give you more information on getting such an alarm.



Let's talk

If you have any questions, need more information or want to talk about anything mentioned in this guide, please phone our free and confidential helpline on **0808 800 2200**.

