Barns Medical Practice Service Specification Outline: Epilepsy

DEVELOPED November 2018

REVIEW DATE November 2020

Introduction

Epilepsy is a condition where there are episodes of abnormal electrical activity in the brain that results in seizures. Epilepsy can start at any age and often the cause is not known. It can be secondary to problems such as a severe head injury or stroke. There are many different types of seizures. Anti-epileptic drugs are the mainstay of treatment.

Most seizures can be managed at home but patients with poorly controlled epilepsy can suffer from prolonged seizures known as status epilepticus which requires hospital admission. Managing epilepsy is important to prevent episodes of status epilepticus and sudden unexpected death in epilepsy (SUDEP). SUDEP is rare but is more likely to affect people with poorly controlled epilepsy.

Diagnosis

There are a number of different types of seizure. These can be focal seizures where only part of the brain is affected and the patient remains conscious but may or may not be aware of their surroundings. In generalised seizures both halves of the brain are affected and consciousness is often lost. In a tonic clonic seizure the limbs may jerk. With some types of seizure a person may be sleepy or confused for a period following the seizure.

When a first seizure is suspected the person should be referred to the first seizure clinic, run by the neurologists. They will consider taking blood tests, an EEG (a measurement of the electrical activity if the brain), a CT or MRI scan. The specialist will also make the decision whether to start anti-epileptic medication to try and prevent further seizures.

Regular Review

At annual review all patients with epilepsy should have seizure frequency recorded along with last seizure date and type of seizures. Medication should be discussed including any side effects and compliance. Patients should be educated on high risk activities, especially those with poor seizure control. Included in this should be a discussion about driving to determine whether they are unfit to drive and to ensure they have made the DVLA aware of their diagnosis.

The social and psychological aspects should be discussed with referral to GP if there are any concerns.

Contraception should be discussed as a number of anti-epileptic medications are unsafe in pregnancy. Pre-pregnancy counselling should be discussed where appropriate and the patient referred to the specialist nurse if this is required. Valporate is now contraindicated in women of childbearing potential unless they have met the conditions of a Pregnancy Prevention Programme. This involves the completion of a form of acknowledgement signed by the patient and the prescriber and requires to be updated annually. Any woman of childbearing potential who attends for annual review and fits the criteria must have this document signed (Appendix 1)

Height, weight and BMI should be recorded.

Resources for Staff and or Patients

www.epilepsy.org.uk

DVLA - www.gov.uk/health-condition-and-driving

SIGN guideline 143 Diagnosis and Management of Epilepsy in Adults https://www.sign.ac.uk/assets/sign143 2018.pdf

EPILEPSY CONNECTIONS

Whether you are newly diagnosed or have been living with epilepsy for some time, Epilepsy Connections may be able to help you. They will offer you information and advice about epilepsy to help you and your family live well and safely with the condition.

Epilepsy Connections is a registered charity formed in April 2000 and has given support tothose diagnosed with epilepsy in the Glasgow and Forth Valley area. It is a company limited by guarantee and registered in Scotland.

Jim Thompson is employed by Epilepsy Connections and will be launching the new Epilepsy Fieldwork Service in Ayrshire and Arran.

How they can help you?

Information about epilepsy

Advice on housing, benefits, transport, travel and managing epilepsy at home, school, college, university or work

One to one, family and group support to allow you to deal with your feelings about epilepsy and its impact.

Guidance on safety issues

Volunteering opportunities, build skills and gain experience, have fun and make new friends

Befriending supports people isolated by epilepsy, aged over 18 years to get out and about, go for a meal, shopping or to the cinema etc.

If you would like to talk to Jim Thompson then please call 07585 570 466 or email him at

<u>jthompson@epilepsyconnections.org.uk</u>

www.epilepsyconnections.org.uk

APPENDIX 1

Patient Safety Information - Valproate

Patient Name: «PATIENT_Forename1» «PATIENT_Surname»

Patient CHI No: «PATIENT_CHI_Number»

This information is for women who are being prescribed Valproate and are of child-bearing potential (able to get pregnant). Read this leaflet along with the patient information leaflet which comes in the medicine box and if you have any questions talk to your local pharmacist.

Valproate, also known as valproic acid (brand names include Epilim and Depakote) is an effective medication used to treat epilepsy and bipolar disorder.

Valproate can be harmful to unborn children when taken by a woman during pregnancy. It can cause serious birth defects and can affect the way in which the child develops as it grows.

Once you are of childbearing age, you will need to make sure you use an effective method of contraception throughout your treatment. Talk to a member of our Nursing Team if you need advice on contraception.

Key Messages

- Make sure you are using an effective method of contraception
- Tell the Practice at once if you are pregnant or think you might be pregnant
- If you decide you want to have a child you should not stop taking your medicine until you have discussed this with your clinician and agreed a plan for switching you onto another product if this is possible.

Patient Signature
Clinician Signature
Date «SYSTEM_Date»

*Please give a copy to the patient and save a signed copy into the patient's medical

record.