

## 4 What to do when someone has a seizure

Knowing what to do—and what not to do—when someone has a seizure is vital.

Help required during seizures depends on:

- the type and pattern of seizure
- how long the seizure lasts and how severe it is
- how the seizure affects the person's consciousness.

Some seizures are brief. Most stop spontaneously. Some seizures may require basic first aid. Others may require medical attention, e.g. prolonged seizures, serial seizures and status epilepticus (see page 2).

Appropriate support and reassurance are essential.

### FIRST AID FOR TONIC CLONIC SEIZURES

#### 1. When the seizure starts:

- note the time
- clear a space around the person
- cushion the head to prevent head and facial injury
- loosen tight neckwear, belts etc
- remove spectacles and high heeled shoes, if worn
- loosen chest and leg restraints on wheelchairs
- reassure others and explain what you are doing.



#### 2. During the seizure DO NOT

- put anything in the mouth or try to remove dentures unless dislodged
- restrain or restrict movements; allow the seizure to run its course
- give drinks, medication or apply a wet sponge
- move the person unless they are in danger, e.g. in water, close to fire.



#### 3. When the movements have stopped:

- make the person comfortable on their side unless you suspect there is an injury to the neck, back or any part of the spine
- ensure airways are clear—wipe away any excess saliva from the mouth and check that vomit or dentures are not blocking the throat
- place something soft, e.g. a cushion, folded jacket behind the person to prevent them rolling onto their back
- reassure the person and tell them what has happened
- check for signs of injury and apply first aid if necessary
- observe the person and stay with them until recovery is complete (they may need assistance to return to their routine)
- provide privacy and offer assistance if there has been incontinence.



## 4. When to get medical help

### Call 999 if:

- it is the person's first seizure
- the seizure lasts more than 5 minutes and you do not know the usual length of the person's seizure
- a seizure lasts 2 minutes more than is usual
- a tonic clonic seizure follows another without full recovery in between
- the person does not regain consciousness
- you are concerned about the person's colour/breathing
- you suspect there has been an injury
- water is inhaled.

## FIRST AID FOR OTHER TYPES OF SEIZURES

### Simple Partial Seizure

- guide away from any immediate danger
- be understanding and reassuring.

### Complex Partial Seizure

- don't restrain or try to distract the person
- gently guide away from any immediate danger
- keep under observation until the person recovers.

### Absence Seizure

- guide away from any immediate danger
- person may have missed important information—check.

### Tonic, Atonic and Myoclonic Seizures

- check for injury, give first aid if needed
- stay with the person till recovered, reassure.

If a tonic clonic seizure follows any other type of seizure, follow first aid for tonic clonic seizure guidelines.

For a more detailed description of seizure types see Leaflet 1 'What is Epilepsy? An Introduction'.

In the case of tonic clonic seizures, the following situations require medical attention.

**Status epilepticus is a medical emergency requiring urgent treatment.**

**Prolonged seizures:** seizures lasting over 5 minutes or 2 minutes longer than usual.

**Serial seizures:** seizures occurring one after another without full recovery in between.

**Status epilepticus:** seizure activity persisting for 30 minutes or more without return to normal breathing or full consciousness.

Prolonged seizures, serial seizures and status epilepticus can occur with **all** types of seizure and require medical attention.

Epilepsy Connections provides Epilepsy Awareness Education for those wanting to know more about epilepsy and managing seizures. For more information contact the office.

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Supporting people with epilepsy

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