

If you have seizures, you can protect yourself from injuries by learning to recognise potential dangers at home and at work, in fact anywhere you go.

You may be able to adapt your environment to reduce safety risks. When this is not possible, learning to foresee safety risks will allow you to make informed choices, balancing the need for safety against your right to independence and participation.

THE BATHROOM

Water in the bathroom poses two risks during a seizure: drowning and scalds. **The most frequent cause of accidental death from a seizure is drowning.** Occasionally, bathing in very hot water can bring on a seizure.

Many of the materials used in your bathroom – tiles, glass, mirrors, metal and porcelain – are hard and may be sharp and breakable.

Most bathrooms are unable to be unlocked from the outside. **People with epilepsy who have seizures where consciousness is lost or altered should be supervised while bathing at all times.**

General

- Leave the bathroom door unlocked so that people can get in to assist you if necessary. If privacy is a concern devise another system to achieve this.
- If possible, take showers or baths when other people are at home.
- A thermostat can be fitted to most hot water services to control the temperature of hot water from the tap which is often unnecessarily hot.
- For safety, water should not be more than 50.5 degrees Centigrade.
- Safety hot water taps are available. These taps have to be pushed in before they can be turned.

The Shower

- Run the cold water first.
- Fit your shower with good quality shatter proof glass. A glazier can discuss the options available.
- A shower curtain makes a good alternative.
- Remove sharp edges from within the shower recess.

The Bath

- Have a shallow bath.
- Use a non-slip mat in the bath.
- Unplug all electrical appliances as soon as you have finished with them and make sure they are off the floor.

THE TOILET

Seizures within this confined space can cause injuries and can make it difficult for people to reach you.

- Leave the door unlocked and devise another system to ensure your privacy.
- Replace an inward opening door with a sliding, concertina, or outward opening door.

THE KITCHEN

Hot liquids, open flames or hot elements and electrical appliances are the main risks in the kitchen.

Improving safety

- Use the back elements of the stove rather than the front ones.
- Turn saucepan handles to the back of the stove.
- Consider buying a stove guard which fits around the top of the stove and lessens the chance of saucepans being pulled over.
- Avoid open topped jugs and consider buying a kettle with an automatic switch off.
- Consider buying a microwave oven because they do not use heat to cook and so reduce your exposure to danger.

THE LIVING ROOM

Open fires, heaters, the sharp edges of furniture and expanses of window glass all pose some risk in the event of a seizure.

- Place guards securely in front of fires and heaters. Avoid radiators that have no guards and, if you are buying a new heater, consider the fan type or a bar heater that can be fixed high on the wall.
- Place furniture in front of windows and glass features.
- Consider oval rather than square tables and furniture without sharp corners.

THE BEDROOM

Bedhead and bedside tables can contribute to injuries during a seizure, as can a fall from the bed.

- Move bedside tables away from the bed and try to reduce hard or sharp surfaces in the bedroom. If possible, use a bed without a bedhead.
- If you are concerned about your pillow, consider sleeping without it or buy a porous pillow that allows as much air as possible to pass through it.
- If falling out of bed is a problem, consider sleeping in a hammock instead of a bed.

Medications

Taking the wrong medication or the wrong dose can be dangerous, as can using the medication after the use by date.

Other people, especially children, are in danger if they take your medication accidentally.

- Keep your medications in their original containers.
- Ensure that the containers are clearly labelled.
- Take medication that is out of date to the chemist to be discarded safely.
- Be aware that accidental poisoning occurs more often when the household is disrupted (for example when children are visiting you or you are on holidays or moving house). (More info on page 12 – medicating safely.)

HELMETS

If you have frequent seizures you may choose to wear a helmet to help protect your forehead, chin and head from injury. However, some helmets can get hot and uncomfortable and if they are not fitted properly, they may not give you enough protection.

- Ask for assistance when you are choosing a helmet to make sure the helmet is the right size for you.
- As well as protection, consider ventilation, comfort, washability and appearance.
- Your occupational therapy department of your local hospital, will be able to fit you for a helmet and will know where to purchase an appropriate one.
- A helmet should be worn when people with epilepsy are involved in sports where head injury may be a risk.

Swimming

- People with epilepsy should swim under the watchful eye of lifeguards and responsible adults who are trained in lifesaving and ready to act in case of an emergency.
- Inform supervisors that you have epilepsy so that they are ready to deal with a seizure, should one occur.
- Diving should be avoided because of the pressure it places in the head.

GENERAL SAFETY

- Follow the normal rules of road safety such as using pedestrian crossings when you are crossing the road.
- Consider wearing identification information such as a bracelet or necklace stating your name, address and medical condition. Medical identification can improve chances of accurate and prompt medical treatment in the event of a seizure occurring outside the home.

Mobile Phones

There has been some recent controversy about the safety of mobile phone use by children. Research has been inconclusive, although there is some indication they may cause problems for children whose brains are more easily damaged.

British Epilepsy Association Medical Advisor, Dr Tim Betts has made the following recommendations:

- Children with epilepsy, 14 and under, should be actively discouraged from using mobile phones.
- Anyone with epilepsy should consider, until the picture is clearer, restricting their use of them to short conversations and monitor their seizure frequency if they are using them a lot – the advice one would give any child or adult.
- People using VNS (vagal nerve stimulation) devices should keep their mobile phone away from the device and not have it in direct contact with the implanted device (e.g. in a pocket over the device). This is the advice given to people with cardiac pacemakers. (VNS is a device which is surgically implanted under the skin).

Further information about any of these issues can be obtained from your doctor or epilepsy association.

REFERENCES:

Pollard, R., Chapman, D.(2002) *Epifile – An Epilepsy Management Manual*. Melbourne: Epilepsy Australia
British Epilepsy Association – from article in Epilepsy Today March 2001