



Journal Homepage: - [www.journalijar.com](http://www.journalijar.com)

## INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI: 10.21474/IJAR01/13509

DOI URL: <http://dx.doi.org/10.21474/IJAR01/13509>



### RESEARCH ARTICLE

#### PSYCHO EDUCATION INTERVENTION IN SEIZURE

Mrs. Chandraleka E.<sup>1</sup> and Dr. S. Sivapriya<sup>2</sup>

1. Associate Professor - Indirani College of Nursing, Puducherry.
2. Lecturer, Ranimeyyammai College of Nursing, Chidambaram, Tamilnadu.

#### Manuscript Info

##### Manuscript History

Received: 31 July 2021

Final Accepted: 31 August 2021

Published: September 2021

#### Abstract

Epilepsy is a common neurological disease, which affects people of all ages. Patients often have deficits regarding their knowledge of epilepsy. Many of them have recurrent seizures, psychosocial, and emotional problems and report restrictions in daily living as a result of their epilepsy. Meanwhile, a variety of psycho educational programs have been developed with the intention to improve knowledge, coping with epilepsy, quality of life, compliance, and health status. These educational programs vary considerably in regard to content, didactic approach, and objectives. Overall, from the small number of evaluated programs it is evident that educational programs can improve epilepsy-related knowledge, improve the management of seizures, and reduce misinformation and misconceptions about epilepsy. They can support adults, adolescents, and children with epilepsy and their families and enable them to cope with the disease; they can sometimes also reduce seizure frequency and improve compliance with antiepileptic drugs. The effects on emotional disorders (e.g. depression) and quality of life are less obvious.

Copy Right, IJAR, 2021,. All rights reserved.

#### Introduction:-

Seizure is a common neurological disorder in Children Ancient people believed that Seizure disorder is an extraordinary phenomenon, in which God, Demons or evil spirit knocked down somebody and jerks their body uncontrollably and brought back without apparent ill effect.

#### Definition

Seizure is defined as the disturbances of the brain functions resulting from abnormal excessive electric discharge from the brain.

#### Causes

1. Positive family history
2. Birth injury or trauma
3. Fever
4. CNS infections
5. Dehydration
6. Decreased blood glucose level
7. Decreased blood calcium level,

**Corresponding Author:- Mrs. Chandraleka E.**

Address:- Associate Professor - Indirani College of Nursing, Puducherry.

8. Decreased blood sodium level.
9. Injury to the brain.
10. Brain tumors, bleeding inside the brain
11. Poisoning, allergy, heat stroke, breath holding spells

### Types of Seizures

1. Generalized seizures
2. Absence seizures
3. Partial seizures

### Clinical Manifestations Generalized Tonic Clonic Seizures

It is the most common form of childhood seizure disorder. It has 4 phases

1. **An aura:** a peculiar sensation with dizziness occur before the contractions of the body
2. **Tonic phase:** child's entire body becomes stiff, Face become pale, Eyes fixed in one position, arched back, head turned to backward or in one side, arms are usually flexed and hands are clenched. The child loses consciousness and having frothy discharge from mouth due to inability to swallow the saliva. Duration of the stage may be about 30 seconds.
3. **Clonic Phase :** This phase is manifested with rhythmic jerky movements which start from one part and spread to all over the body. Child may pass stool and urine involuntarily and may have tongue or cheek bite. Duration of this stage may be few minutes to even a few hours.
4. **Postictal or post convulsive state:** The child is usually become sleepy, confused or exhausted or performs activities, may complain head ache. The child may not be recalling the episode.

### Absence seizures

It is manifested by

1. The child may loss contact with the environment for a few seconds.
2. The child may appear as staring or daydreaming.
3. The child may discontinue the activity suddenly.(reading, writing) and may resume the same activity when the seizure is over.
4. Rolling of the eyes, nodding of the head, slight hand movements and smacking of lips. Duration is 5-10seconds.

### Diagnosis of Seizure Disorders

1. History with description of the convulsive episodes.
2. Blood urine and CSF examination
3. EEG

X-ray of head, CT scan, MRI scans of head.

### Management of Seizure Disorder

1. Drug therapy,
2. Diet therapy,
3. Surgery if indicated.
4. There are many types of antiepileptic drugs, and the kind that you receive depends on the type of seizures that you experience. It is very important to follow the directions for taking your medication exactly. You should not stop taking a medication without talking to your doctor first. Under your doctor's supervision, medication may be stopped after a period of seizure-free years.
5. A ketogenic diet may be used to treat recurrent seizures in children. This is a diet low in carbohydrates and high in protein and fats. The diet causes ketogenic to be released by the body, which reduces the incidence of seizures.
6. A vagus nerve stimulator is a device that is surgically placed in the chest. Electrodes from the device are connected to the left vagus nerve, a nerve that travels to the brain. The device generates regular electrical impulses to the nerve. Vagus nerve stimulation has been shown to reduce the incidence of seizures and the amount of antiepileptic medication that a person needs to take.
7. A craniotomy is a surgery that removes a piece of the skull to allow access to the brain. Brain surgery is used to remove the brain cells that send abnormal nerve signals and cause seizures

**Factors that Trigger Seizures**

1. Flickering lights, camera flash, headlights of vehicles, reflections of lights and rotating lights of fan.
2. Sudden loud noise, specific voices, songs or nursery rhymes.
3. Startling or sudden movements
4. Extreme or drastic change in temperature.
5. Fatigue and decreased water content of the body.
6. Excessive ingestion of coffee or tea.
7. Decreased blood glucose level
8. Sleep disturbances.
9. Increased length of playtime.

**Seizure Precautions**

1. Reduce the length of playtime
2. Provide supervision while swimming and handling with hazardous objects.
3. Identify and avoid triggering factors whenever possible.
4. Administer medication as per Doctors order. Do not skip a single dose of medication.
5. Do not stop medication if any side effects seen without informing consultant

**Regarding Videogames**

1. Players should not play if they are tired specially if they are sleep deprived.
2. Take frequent breaks from the game and look away from the screen every once in a while.

**Self Management In Seizure****Tips to Improve Seizure Control**

1. Take medications exactly as prescribed.
2. Develop a routine and take your medications at the same time every day.
3. Use a medication organizer that separates pills by day of the week and time of day.
4. This helps you determine if you've missed a dose.
5. Get creative! Use an alarm on your watch or phone.

*f***Keep all clinic visits.**

1. Be sure to write down any questions or concerns you have and bring them to your appointment.
2. Always inform your health care provider of all other prescription drugs, over-the-counter drugs, or herbal remedies you are taking.
3. Anti-seizure drugs can interact with other drugs. Mixing them can be dangerous.
4. Never stop taking your anti-seizure drug without the guidance of a neurology provider. *f*
5. Stopping an anti-seizure drug abruptly can raise your seizure risk.
6. Do not wait until you are low or out of medication before refilling your prescription. *f*
7. Confirm that your medication looks the same when you pick up before you leave the pharmacy. *f*
8. Try to keep at least a two week supply of medication available at all times.
9. The drug level along with your seizure frequency and your report of any side effects can guide your health care provider in making decisions about medication adjustments

**For the Person with Seizures**

1. Wear a medical ID bracelet or necklace that says you have epilepsy. *f*
2. Take your medicine on time, everyday. *f*
3. Try to get enough sleep.
4. If you have a warning before a seizure, let someone nearby know and move to a safe place. *f*
5. Carry a cell phone so you can contact family or friends *f*

**Stress Management Techniques**

While there is no definite evidence that reducing stress help seizures, a recent study showed that nearly 9 in 10 people who actively managed their stress believed it reduced their risk of seizures. Common sense tells us that if something is bothering you, see what you can do to avoid it or make it better.

1. Use a diary and write down what's likely to cause stress for you.
2. Try to avoid stressful situations.

3. When a stressful situation is unavoidable, make sure you are doing your best to get enough sleep and take your seizure medications on time.
4. Exercise regularly.
5. Limit long naps during the day. Sleeping during the day will cause sleep problems at night.
6. Pace yourself and take frequent breaks.
7. Set priorities for what is important in your life and let the rest go.
8. Seek help. Talk to your doctor, nurse, or counselor. Let them know what's bothering you.

**Conclusion:-**

Seizure disorders are type of neurological disorders found in childhood. It is a condition characterized by recurring seizures. It is not a curse or punishment for bad behaviors. By the use of antiepileptic drug and avoiding triggering factors we can reduce the frequency of seizure .

**Reference:-**

1. Achars (2001). Text Book of Paediatrics. 3rd edition .India: orient Longman.
2. Adele Pillitery (2005). Child Health Nursing. (2nd edition.). Philadelphia; J.B. Lippincott Company Publishers
3. Nelson (2004). Textbook of Paediatrics. (11<sup>th</sup> edition.). India: saunders Publishers.
4. Parul Dutta (2007). Pediatric Nursing. (2<sup>nd</sup> edition). New Delhi: Jaypee brothers publishers
5. Journal of Pediatrics (2012). An epileptic assessment. (1<sup>st</sup> edition). New Delhi:
6. Nelson (2004). Textbook of Paediatrics. (11<sup>th</sup> edition.). India: saunders Publishers.