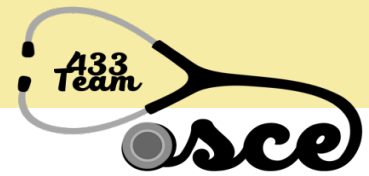


# Nervous System



## Seizures

<i>Chief Complain: seizure</i>	
Questions	Indications
<b>History of present illness</b>	
Onset and how many times did it happen?	To assess the severity
Character	Convulsion, absence.
Position (sitting, supine, standing?)	
Duration	
Loss of consciousness	<ul style="list-style-type: none"> <li>- Consciousness is intact in partial (focal) epilepsy</li> <li>- Loss of consciousness occurs in generalized epilepsy</li> </ul>
Confusion or weakness after the event	
Speech difficulty	
Incontinent of urine / bowel	
<b>Before the episode</b> (Do you experience any kind of a warning or unusual feeling at the onset, or immediately preceding the seizure?)	Aura (represent a simple partial seizure)
Lightheadedness / headache	
Deja vu	Temporal lobe epilepsy
Rising epigastric sensation	Temporal lobe epilepsy
Racing heart	
Paresthesia	Parietal lobe epilepsy
Chest pain / SOB	
Vision problems	Occipital lobe epilepsy
Nausea, vomiting, diarrhea	
Fever/chills	

<b>What happens during the seizure?</b>	
Head or eye deviation to one side	Seizure originating from the frontal eye fields
Motor activity start at one side of the body	
Ability to talk during the seizure	
Excessive eye blinking at the onset	Occipital lobe seizure
Lip smacking	Temporal lobe seizure
Lose control of bladder function	Complex partial seizure
Biting tongue	Complex partial seizure
<b>What happens immediately following the seizure? (Postictal period)</b>	
Sleeping	Generalized tonic-clonic seizure
Disorientation / lack of the awareness of the surrounding	Complex partial seizure
Hemiparesis / hemiplegia	Focal onset
Aphasia	Involvement of the language areas in the dominant hemisphere
<b>Triggering factors</b>	
Is there any thing can trigger the seizure?	Sleep deprivation, menses, Antihistamine, stress, fever and exercise.
<b>Past medical</b>	
Similar episodes before	
Psychiatric disorders	
Neurologic deficit	Stroke, tumor or TIA
Head injury	
Genetic disorders	
<b>Medication</b>	
<b>Family history</b>	
Similar attacks	

social History	
Who lives with the patient?	
Smoking \ alcohol	Alcohol is risk factor for generalized tonic-clonic seizures.
Level of education	Help to determine how well the condition could be managed.
Driving	Danger of drowning

### differential diagnosis Mention three

- Transient ischemic attack
- Syncope
- Nercolepsy
- Pseudoseizures

### Mention three differences between seizures and syncope

Comparison of clinical features in cardiogenic syncope versus seizure disorders		
Clinical features	Cardiogenic syncope	Seizure disorders
Loss of consciousness	Typical	Common
Episode duration	Seconds	Minutes
Involuntary movements	Common	Typical
Amnesia	Yes	Yes
Arrhythmia	Common	Rare*
Electroencephalogram	Slow waves Flattening	Focal or general spike activity
Responsive to AEDs	No	Often
Short term mortality†	High	Low

### What is the 1<sup>st</sup> line of treatment in epilepsy?

.carbamazepine, sodium valporate, lamotrigine