

## First Aid for Seizures

**First aid for seizures is very simple and rather intuitive. It is centered around three things:**

1. Keeping the person safe
  2. Not forcing the person to do anything
  3. Getting help if needed
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**First aid for any type of seizures includes:**

- Keeping calm and reassuring other people who may be nearby that there is no need to panic or worry.
  - Timing the seizure (if the seizure lasts more than 5 minutes, or a series of seizures lasts more than 5 minutes without a full recovery between them, further steps might be required. Read on to learn more.)
  - Clearing the area around the person of anything hard or sharp (so they can't unintentionally hurt themselves against or with any of it).
  - Trying to gently guide anyone who is having a seizure away from any hazards—like freeways, slippery slopes, staircases or other places they might harm themselves.
  - Being friendly and reassuring when the person returns to consciousness.
  - Staying with the person until the seizure ends naturally.
  - Loosening ties or anything else he or she might have around his or her neck that might make breathing difficult. You want to ensure he or she can breathe as easily as possible.
  - If the person has suffered a generalized tonic clonic (grand mal) or drop seizure and is on the ground, try to put a jacket or something soft under his or her head, to help lessen any possible head trauma.
  - If the person is lying down, you should try to turn him or her gently to one side, which will help keep his or her airway clear.
  - Offering to call a taxi, friend or relative to help the person get home if he or she seems confused or unable to get home by him or herself.
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**What you don't do is almost as important—if not more important—than what you do do for a person experiencing a seizure:**

- NEVER attempt to hold a person down, stop his or her movement, or force them to do anything.
  - NEVER attempt to shove anything into his or her mouth. It's impossible to swallow one's own tongue—and chances are, instead of helping the person in any way by shoving something into their mouth, you'll dislocate, bruise or break his or her jaw or teeth.
  - Do NOT attempt artificial respiration except in the unlikely event that a person does not start breathing normally again after the seizure has stopped.
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## Is an Emergency Room Visit Needed?

In most cases, you do not need to call an ambulance or take someone who has had a seizure to the emergency room. But if any of the following are true, immediate medical attention is necessary—so you *should* call an ambulance or take the person to the emergency room:

- If the person has **diabetes**
- If the person has **brain infections**
- If the person has **heat exhaustion**
- If the person is **pregnant**
- If the person has been **poisoned**
- If the person has a **high fever**
- If the person has a **head injury**
- If the person is **injured**
- If the seizure **happened in water**
- If the person **isn't wearing a medical I.D.** and one knows the person or if he or she has epilepsy
- If the seizure **continues for more than five minutes**
- If a **second seizure starts** shortly after the first ended
- If the person **does not return to consciousness** once the seizure has ended and he or she has stopped shaking

An uncomplicated generalized tonic clonic (grand mal) seizure in someone who has epilepsy is not a medical emergency, even though it might look like one. It will usually stop naturally after a few minutes without any ill effects. The average person with epilepsy who has had a seizure is usually able to continue whatever he or she was doing after a rest period, and may need only limited assistance, or no assistance at all, in getting home. In other circumstances, an ambulance should be called.

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### In closing...

- During a generalized tonic-clonic seizure, the person suddenly falls to the ground and has a convulsive seizure. It is essential to protect him or her from injury.
- You don't have to do anything if a person briefly stares or shakes his or her limbs. Such a person would likely be experiencing a non-convulsive seizure.
- Seizures can happen any where at any time, even on public transportation, in an airplane or at the beach in the water. If you will be with a person with epilepsy in any of these situations, you should learn the appropriate first aid—but it will probably consist primarily of getting the person to safety and keeping him or her safe until help has arrived. For instance, if a person has a seizure in the water, you should try to keep him or her afloat or try to get him or her to the beach. Mouth-to-mouth, CPR or any other type of resuscitation should only be attempted if the person has not returned to normal breathing *after* the seizure stops (or if the seizure does *not* stop).
- If the person hits his or her head while falling, his or her post-seizure condition should be carefully monitored. Emergency medical attention may be required.
- While you may never have to manage a seizure in a child with epilepsy, knowing what to do can make a big difference if a seizure does occur. In most cases, all you need to do is a few very simple things to keep the child safe until the seizure ends on its own, which is the overriding theme for seizure first aid: Keep them safe.
- If a seizure lasts more than five minutes without any sign of slowing down (or seizures follow one another without stop for more than five minutes), is unusual in some way, or if the person has trouble breathing afterward, appears to be injured or in pain, or recovery is different from usual, call for 911 for emergency help. (*Seizures that last for more than five minutes are frequently referred to as status epilepticus.*)

For seizures occurring in people of any age, there is one simple thing to remember: protect the person from harm until they are fully aware and conscious again.

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