Only 2% of the total population diagnosed with epilepsy for the first time are elderly people. The physical changes related with aging are most likely the cause of epilepsy.

Causes of seizures

- Epilepsy in an elderly person could be the return of a seizure disorder that was in remission for many years.
- Strokes can cause seizures because of the hemorrhage and damage to the brain itself.
- Heart attacks and diseases such as Alzheimer’s can cause changes in the brain which may lead to seizures.
- Disease of the kidneys, liver and even diabetes may cause epilepsy in later life.
- Excessive use of alcohol can trigger seizures or latent epilepsy.
- Brain tumours of any kind may cause seizures.
- Post-traumatic and post-operative traumas can cause epilepsy.
- Surgery to the brain can leave a scar that may cause a seizure.
- A positive family history of epilepsy may be a cause.
- Seizures are associated with physical changes in an older person’s brain caused by a stroke, heart disease, Alzheimer’s disease, or brain tumours.
- Multiple sclerosis may lead to epilepsy.
- Physical changes may cause epilepsy by bodies becoming less resilient with age (e.g. bones are more fragile and make elderly people prone to falls which may result in head trauma and thus epilepsy).
- Neglected and acute meningitis (encephalitis) may cause epilepsy.
- As we get older the blood vessels that supply blood to the brain may become narrower and harder which can affect the flow of blood (and thus oxygen) to the brain.

The most common causes of seizures starting in later life are cerebrovascular (i.e. changes or damage to the blood vessels around the brain).

Epilepsy and the process of ageing

Decrease in mental alertness, mood changes and memory loss can be caused by several health problems associated with aging. Older people may be more sensitive to drug side effects which can include tiredness, unsteadiness, tremor, visual disturbances, changes in mood or behaviour, depression or stomach upsets. It may be possible to completely eliminate these by adjusting or changing medication. Should these occur you should report any side effects to your doctor or specialist.

The social impact of epilepsy on the elderly

The first seizure is a very traumatic experience with far reaching social consequences. An elderly person may feel useless and of little value to society. For any person with epilepsy loneliness, physical changes, their inability to live independently or drive a vehicle can cause depression. This is even worse for an elderly person with epilepsy.

Elderly persons with epilepsy have a higher risk of sustaining head injuries or fractures due to frequent falls.

They may feel as if they have lost control over their own lives and uncertain about their future which may be worsened by social isolation.

If the person does not experience an aura (a warning sensation that occurs prior to a seizure) he/she will need to adjust accordingly.

See the Do’s and Don’ts section.
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Medication

Memory problems often affect people with epilepsy. However, epilepsy medication works best when blood levels remain steady which requires the correct dosage taken at specific times (as prescribed) to achieve optimum therapeutic results.

It can be especially difficult for older persons to keep track of when to take what medication. Therefore we recommend:

- Using a pill box/dispenser divided into segments according to the time and day which may be purchased from most chemists and even some retail stores.
- Always asking your doctor/pharmacist when to take your tablets (e.g. before or after meals).
- Packing medication in sachets (plastic bags) marked with the specific hour of the day and day of the week these should be taken. A friend or family member can pack these if the person has difficulty in packing his/her own medication.
- Always monitoring the expiry date of all medication. If your dosage is changed and you have a surplus of medication take note of the expiry date thereafter medication should be carefully destroyed and not taken.
- A wristwatch with an alarm to remind you when to take your medication.
- Asking a friend or family member to assist in keeping track of reordering dates and marking the calendar accordingly.
- Keeping your tablets in a cool and dry place. Some medication (e.g. Epilim) is very sensitive to moisture and is best kept in their blister packs until needed.
- Not giving any of your epilepsy treatment to another person who had a seizure or complain of headaches.

If you forget to take your medication do not take a double dose. Ask your pharmacist or doctor for advice.

Toxicity: The therapeutic levels of anti-convulsant medication must be monitored through regular blood tests. If the levels are too high it could cause toxicity which could, in turn, manifest as dizziness and confusion.

Drug Interaction: Elderly persons are more likely to be taking a variety of medication for different medical reasons.

These drugs can interact and produce negative side effects. It is therefore very important to discuss possible drug interaction with the doctor and/or pharmacist.

Sensitivity: A negative reaction to drugs may result in depression, agitation, confusion or loss of memory. Monitor any changes in sleeping or eating patterns, bearing in mind that people may be sensitive to a specific drug. Consult the doctor and never change or stop medication without medical advice.

Do’s and don’ts

- Remember that fire, heat and water can be dangerous to any person with epilepsy and especially older persons.
- Do not smoke or abuse alcohol if you have epilepsy.
- Avoid carrying hot dishes or boiling water in a kettle.
- Set the water temperature on your geyser lower to prevent the water from burning you.
- Do not bathe or shower in excessively hot water as it may trigger seizures.
- Avoid ironing if at all possible.
- You can drown in very small amount of water. If possible, shower rather than taking a bath and do not lock the bathroom door.
- Wear rubber gloves when handling or washing glassware.
- Place a screen in front of open fires and do not carry hot ashes.
- If possible, avoid living in a house or flat with stairs as you may fall down the stairs while having a seizure.
- Carpeted floors and padded furniture provide more protection.
- Protective padding can be used on sharp corners of tables to prevent injuries.
- Keep in touch with family or friends with beepers and/ or mobile phones.
- A MedicAlert bracelet can be useful to identify a person having a seizure enabling a member of the public to assist him/her. You can purchase a MedicAlert bracelet at www.medicalert.co.za or by calling 0860 111 2979.

It is important to remember:

- DO emphasise what an elderly person with epilepsy can do rather than what he/she cannot do (while at the same time taking sensible precautions).
- DO treat the elderly person like everyone else in the family.
- DO help your elderly relative/friend to integrate into as many social activities as possible (with the necessary precautions) to enable a healthy social life.
- DO allow the elderly person to make his/her own decisions where possible.
- DON’T overprotect elderly people with epilepsy, but allow him/her to identify his/her own strengths and weaknesses.

Should you have any further concerns about caring for an elderly person with epilepsy you can contact an Epilepsy South Africa Branch close to you for assistance and advice, including contact details of other organisations able to offer support and advice on various issues concerning elderly persons.