



## Epilepsy and Behaviour

The nature of challenging behaviour in people with epilepsy is not fully understood. Estimates of challenging behaviour in this group range from 10% to 50%.

### Causes of behaviour problems

- Underlying brain damage
- Anticonvulsant medication often causes dose related or idiosyncratic behavioural side effects
- Sub-clinical epileptiform discharges can cause transitory cognitive impairment
- Aggressive behaviour that occurs during and immediately after a complex partial may reflect confusion and is increased or induced by attempts to restrain the person
- Aggression may occur with postictal confusion as an individual attempts to resume normal activities but remains confused
- Environmental factors identify when the is more or less likely to occur—  
Is it when staff are in close proximity?  
Is it when the person is isolated from staff?  
Is it in high or low structured activities?  
Is it during periods of high rate demands?

### Common types of behaviour problems

- Difficulty with attention and concentration
- Motor hyperactivity
- Anxiety
- Irritability
- Aggressive verbal or physical behaviour
- Poor social skills
- Impulsiveness
- Lack of motivation and energy
- Mood swings
- Depression
- Inability to plan and organise behaviour

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### How to tell if the behaviour is seizure related

If a person with epilepsy does display challenging behaviour, it is important to ask the following questions in an attempt to identify the cause of the behaviour.

#### Question 1

- Is the behaviour caused by seizures?
- Important clues to help you answer:
  - Is the pattern similar every time?
  - Is the person drowsy, confused or sleepy afterwards?
  - What is the person like between outbursts of behaviour?

#### Question 2

- Is the behaviour caused by medication?
- Important clues to help you answer:
  - When did the problem start? Did it coincide with changes in medication?
  - Is the person off their food?
  - When does the difficult behaviour occur?
  - Is it after taking medication?

#### Question 3

- Is the behaviour independent of seizures or medication?
- Important clues to help you answer:
  - Has the behaviour always been a problem?
  - Do changes in medication, or the number of seizures appear to have no effect on behaviour?

### Management

- Recognise all partial seizure, the build up to the seizure and the post ictal period.
- Be aware of what NOT to do in a complex partial seizure as well as what to do. Identify trigger factors and try to avoid these situations.

## Adapting strategies

People with epilepsy may be less responsive to the traditional methods of behaviour management. This does not mean that these methods should be disregarded. However they may need to be adapted and altered. Finding a strategy that works is often a matter of trial and error.

Some strategies to try include—

- Environmental compensations to reduce stress
- Avoiding situations which are known to cause stress
- Reorganise less structured times of the day
- Separate goals into small sequential steps
- Use frequent repetition
- Model calm, controlled, predictable behaviour
- Redirect rather than confront organically based behaviours such as compulsions
- Use visual clues
- Have a consistent routine
- Keep rules simple and straight forward

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