

Risk and epilepsy



When looking at strategies to reduce risk and improve safety for an older person living with epilepsy there are a number of things to consider.

A home or aged care facility safety assessment can be performed by a registered Occupational Therapist who can make recommendations to ensure the person's safety and reduce risk.



Risk and epilepsy in the later years

Managing risk is about identifying negative seizure or medication impacts and putting in place strategies to manage them.

Depending on the seizure type there may also be a number of safety issues which need to be considered, they could include always swimming with a companion, having on-call or in-house support overnight and the need for support with commuting.

What does this mean for the older person?

Managing risk is an important part of the epilepsy management process. The first step in managing risk is identifying the risk factors that apply to each person. Just as each person's epilepsy presentation is different, each person's risk assessment will determine different risks to be managed.

For the older person the level of risk and what supports they will need to manage the risk will depend on a number of factors.

Does the older person:

- live independently in their own home with a partner or family?
- live independently in their own home alone?
- live independently in their own home alone with carer support visits?
- live in a supported care environment e.g. aged care facility?

The degree of independence and support available to the older person has a direct impact on the risk associated to an activity. Living independently and alone for example creates a higher level of risk in the home as compared with living within an aged care facility where risk is managed as a matter of course.

When managing risks it is important to look at strategies that will either remove the risk e.g. do not participate in an identified risky activity, or reduce the risk e.g. participate with appropriate protection or support.

Risk management considerations:

- Living independently and alone carries risk if no one can enter the house to assist when needed; key-locks provide entry to the home in the event of an emergency. Regular visits by family and/or friends also reduces isolation.
- Floor surfaces can present trip or slip hazards; minimise surface clutter and ensure there are no loose floor coverings.
- Bed pillows present a suffocation risk for night seizures; firm pillows or anti-suffocation pillows are safer to use.
- Falls present a risk of hitting furniture or items in the home; limiting clutter within the home reduces the risk of injury in the event of a fall.
- Remove the risk of injury by avoiding working or walking on ladders and ledges.
- Reduce the risk of drowning, should you have a seizure while swimming by always swim with a companion.
- Reduce the risk of head injury by wearing a helmet when there is ongoing seizure activity resulting in falls.
- Reduce the risk of falls when shopping or engaging in community activities by being aware of the immediate environment, keeping hands free as a support or having a companion.

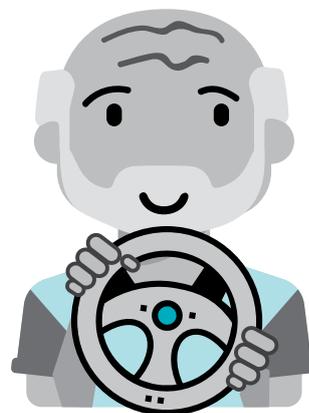
Bathing carries additional risks for older people with epilepsy, consider:

- bathroom and toilet doors that open outward rather than inward, which can be opened in case of a fall or install safety/lift off hinges.
- using a shower which is safer than a bath, as it reduces the risk of drowning should a seizure occur.
- using a shower chair which is safer than standing in a shower, to reduce the risk of falling.
- attaching a shower head/rose to a bath tap and taking a shower sitting down with the bath plug out, which is safer than a bath.

Kitchens can present many hazards due to flame, heat, sharp knives and wet surfaces. Consider the use of a microwave instead of the stovetop and a food processor rather than a knife to reduce risks associated with seizures that involve involuntary movements or falls.

Take care with floor surfaces in wet areas to minimise the risk of slipping or tripping.

Driving and travelling carry additional risks for older people with epilepsy. Refer Information Sheet – *Travelling and epilepsy*.

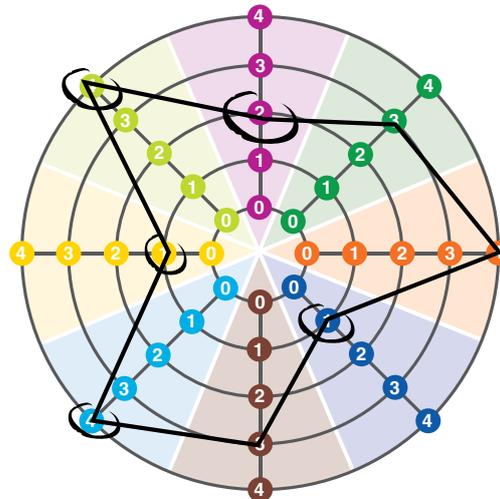


What can you do to help?

Consider the following strategies to support an older person manage the risk associated with their epilepsy and seizure activity:

- Control any potential risks by ensuring that all support staff and carers understand the impacts of epilepsy and are trained in reading and understanding the person's Epilepsy Management Plan (EMP). Additionally, ensure all support staff and carers are trained in seizure first aid and administration of emergency medication as required by the individual.
 - Ensure the older person has regular visits from family/friends if living independently or alone which will also reduce risk of isolation.
 - Support the person to complete an Epilepsy Wellbeing Map™ which will assist in identifying individual risks.
 - Support the person to complete a *Personal risk register* on the next page which will assist in identifying strategies to manage risks.
- Support the older person to assess whether additional carer support or access to personal alerts or alarms would be of benefit during identified high risk activities e.g. sleep, swimming
 - Ensure there is an observer or swimming companion trained in seizure first aid to support the older person when swimming.

Epilepsy Wellbeing Map™



Where to go for further information?

Epilepsy Foundation

www.epilepsyfoundation.org.au

Epilepsy Wellbeing Mapping Tool

www.epilepsywellbeing.com.au

Victorian Government, Department of Health and Human Services, Seniors Online Victoria

www.seniorsonline.vic.gov.au

Search: Australia MedicAlert Foundation

This information sheet is part of a suite of resources that are targeted to aged care workers and carers of older people, to assist with caring for older people living with epilepsy.

The information contained in this publication provides general information about epilepsy. It does not provide specific advice. Specific health and medical advice should always be obtained from an appropriately qualified health professional.

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