

Healthcare Lingo

Antiepileptic drugs (AEDs)

Medicines to treat seizures. Also called antiepileptic medications, anticonvulsants, antiseizure drugs.¹

Aura

A warning that you have before a seizure, or an actual seizure. An aura might be a change in a sensation, such as your sense of smell, taste, or sight. Or it could be a physical change, such as feeling lightheaded or dizzy.²⁻⁴

Ketogenic diet

A special high-fat, low-carbohydrate diet that may be prescribed by your doctor in addition to medications to help control seizures.⁵

Lifestyle factors

These are things like getting enough sleep, exercising regularly, and decreasing stress that might help you manage your epilepsy.⁶

Neuron

A nerve cell. Nerve cells communicate with each other in the brain and can send messages to other parts of the body.⁷

Neurologic

Relating to neurons (nerve cells).⁷

Quality of life

Your sense of well-being. Your sense of well-being comes from how satisfied you are with your roles, activities, goals, and opportunities in life.⁸

Seizure frequency

How often you have seizures.

Seizure triggers

Factors that might cause your seizures, such as stress or lack of sleep.⁸

Self-management

Taking responsibility for your own behavior and well-being, and managing your own day-to-day health.⁹

Status epilepticus

A prolonged, severe seizure that can cause brain injury. Any seizure that causes muscle contractions and lasts more than 5 minutes can be a medical emergency, and someone should call 911.¹⁰

SUDEP

Sudden unexpected death related to epilepsy. It is not caused by drowning or another type of accident that could lead to death while having a seizure. SUDEP can happen with or without a seizure.¹¹



References

1. Perucca E, Tomson T. The pharmacological treatment of epilepsy in adults. *Lancet Neurol.* 2011;10(5):446–456.
2. Epilepsy Foundation. What Happens During a Seizure. <http://www.epilepsy.com/learn/epilepsy-101/what-happens-during-seizure>. March 2014.
3. Boggs JG. Simple Partial Seizures. Medscape. <http://emedicine.medscape.com/article/1184384-overview?pa=2LkI43pUJ9qhbNCmbvH6dC9VbFUt%2Bfsgd6maGfritZu4STfKIW7jYutR7VSeJY4n28SivI8zjYv73GUyW5rsbWA%3D%3D>. February 22, 2016.
4. Fisher RS, Cross JH, French JA, et al. Operational Classification of Seizure Types by the International League Against Epilepsy. International League Against Epilepsy. <http://www.ilae.org/visitors/centre/documents/ClassificationSeizureILAE-2016.pdf>.
5. Epilepsy Foundation. Dietary Therapies. <http://www.epilepsy.com/learn/treating-seizures-and-epilepsy/dietary-therapies>. October 2013.
6. Centers for Disease Control and Prevention. <https://www.cdc.gov/epilepsy/index.html>. August 2016.
7. National Institute of Neurological Disorders and Stroke. The Epilepsies and Seizures: Hope Through Research. http://www.ninds.nih.gov/disorders/epilepsy/detail_epilepsy.htm. February 2016.
8. England MJ, Liverman CT, Schultz AM, Strawbridge LM, eds. *Epilepsy Across the Spectrum. Promoting Health and Understanding*. Washington, DC: Institute of Medicine of the National Academies. The National Academies Press; 2012.
9. Agency for Healthcare Research and Quality. Self-Management Support. <http://www.ahrq.gov/professionals/prevention-chronic-care/improve/self-mgmt/index.html>. Published 2015.
10. Trinka E, Cock H, Hesdorffer D, et al. A definition and classification of status epilepticus – Report of the ILAE Task Force on Classification of Status Epilepticus. *Epilepsia.* 2015;56(10):1515–1523.
11. Collazo IVM, Tatum WO. Sudden unexpected death in epilepsy (SUDEP). Are all your patients informed? *Neurologist.* 2016;21(4):66–71.

