



*Serving Pinellas and Pasco Counties*



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### BRANCH OFFICE

Suncoast Epilepsy Association, Inc.  
9851 State Road 54  
New Port Richey, Florida 34655  
(727) 375-7774  
Tuesday and Thursday 8:00 am - 4:30 pm

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### EPILEPSY

**The More You Know About It...  
The More You Want To Help!**

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### SEA IS FUNDED BY

State of Florida Department of Health  
United Way of Pinellas County  
United Way of Pasco County  
Pinellas County Social Action Funding  
Pasco County Government  
Membership Drives, Donations,  
Special Events, Bequests and Trusts

### BOARD OF DIRECTORS

A volunteer Board of Directors is responsible for developing the SEA mission and overseeing its implementation. These community leaders ensure adequate resources, manage funds, monitor programs and strive to enhance the agency's public image.

The Board of Directors is assisted by a Professional Advisory Board (PAB) made up of medical, legal, and psychosocial professionals.

## Yes, I want to help Suncoast Epilepsy Association

- \$500.00 BUILDING FUND
- \$ \_\_\_\_\_ CHRISTIAN STEVENSON MEMORIAL CAMP FUND
- \$75.00 PATRON
- \$50.00 FRIEND
- \$30.00 FAMILY MEMBERSHIP - (entitles you to quarterly newsletter and participation in annual meeting)
- \$25.00 INDIVIDUAL MEMBERSHIP - (entitles you to quarterly newsletter and participation in annual meeting)
- \$ \_\_\_\_\_ EVERY GIFT HELPS!

*Thank you for your Tax deductible donation, Please remember SEA in your will.*

## WHAT IS EPILEPSY?

Epilepsy is a chronic disorder of the brain. For a brief time, the brain does not work the way it normally does. It sends the wrong signals to the body and seizures result.

## WHAT ARE SEIZURES?

Seizures are sudden electrical discharges in the brain causing a change in the person's movements, sensations or consciousness.

## WHO HAS EPILEPSY?

Medical studies indicate that one person in 10 will have a seizure in his or her lifetime. More than 2 people in 100 have epilepsy. Children and the elderly have a higher incidence. More people have epilepsy than have multiple sclerosis, muscular dystrophy, cerebral palsy, cystic fibrosis, hemophilia and autism combined.

## WHAT CAUSES EPILEPSY?

While not inclusive, here are a few causes: head injuries, an infection of the brain, alcohol or drug abuse, something that happened before birth or during the birth process, high fevers and toxicity. Despite our knowledge about the human brain, nervous system, and body, the cause of epilepsy is frequently unknown.

## WHAT EPILEPSY IS & IS NOT!

Epilepsy IS NOT mental illness!  
Epilepsy DOES NOT make a person retarded!  
Epilepsy IS NOT caused by an evil spirit!  
Epilepsy IS a symptom of a brain dysfunction!  
Epilepsy CAN sometimes be prevented!  
People with epilepsy CAN go to school!  
People with epilepsy CAN have families!  
People with epilepsy DO lead productive lives!

## CAN EPILEPSY BE TREATED?

Yes! Accurate diagnosis and medication can control or reduce the number of seizures in nearly 80% of all cases. In some cases, surgery or a special diet can nearly eliminate epilepsy. Meanwhile, new medications and medical procedures hold out hope for greater seizure control.

## ASK US ABOUT EPILEPSY

SEA's professional staff is available without charge, to make presentations about epilepsy. Presentations feature a speaker, audio visuals, brochures, and other information about epilepsy and its impact upon the individual and society.

## PROGRAMS

**CASE MANAGEMENT** Individuals with epilepsy in need of related medical and dental care receive one-on-one counseling, help with individual goal setting and referral to other service providers when appropriate. Support group sessions are available at several locations. Call (727) 546-2856, for date, time and location information.

**MEDICAL CARE** Medical professionals provide services which include initial diagnosis and evaluation, follow-up visits, blood serum testing, EEG, MRI and CT Scanning.

Several area dentists provide general dentistry and specialized periodontal care for epilepsy related symptoms.

**EMPLOYMENT** Clients who are job ready and motivated to seek employment are provided employment assistance and job seeking skills, advice employer education and awareness are also valuable components.

**ADVOCACY** Suncoast Epilepsy Association is part of a statewide movement to insure equal treatment and access for all people. People with epilepsy who desire help with driver's licenses, employment or other discrimination issues can receive information, referral and guidance.

**EDUCATION** Public and professional education are a major effort. General epilepsy education, awareness of SEA services, and epilepsy prevention information are provided to physicians, nurses, emergency-first responders, school personnel and students, County Public Health units, employers, the elderly, substance abusers and their care givers, and the general public.

**PREVENTION** Prevention is a part of SEA's education effort. This proactive program seeks to prevent some kinds of epilepsy by teaching how to avoid known causes and prevent additional seizures once epilepsy has been diagnosed and prevent social and personal problems associated with epilepsy in our society.

## YOU CAN HELP SEA...

SEA is a nonprofit organization and your donation may be tax deductible. We need:

- Volunteers to assist with agency activities.
- Medical and dental providers.
- In kind gifts of office equipment, furniture, supplies and printing.
- Employers who understand that people with epilepsy can be valuable workers.
- Memorial gifts to honor someone whose life was touched by epilepsy.
- Community leaders interested in epilepsy to assist in the guidance, governance, and agency leadership.

You can also help by

- Joining the "Adopt a Client" program.
- Provide resources for needed medical care.
- Remembering Suncoast Epilepsy Association in your will.
- Becoming a member of Suncoast Epilepsy Association, Inc.
- Sponsoring a child to attend summer camp.

## OUR MISSION

Suncoast Epilepsy Association, Inc. (SEA) is a private non-profit organization committed to assisting people affected by epilepsy through a variety of community based services; striving to reduce barriers and providing the opportunity for clients to attain their maximum potential. Through education and community service, SEA is committed to preventing the development of epilepsy and seizures whenever possible.



# FIRST AID FOR SEIZURES

SEIZURE	WHAT IT LOOKS LIKE	WHAT TO DO
<p><b>GENERALIZED TONIC-CLONIC (Grand Mal)</b></p>	<p>A convulsion with a sudden cry, fall and body stiffness followed by massive jerking movements. Breathing may be shallow or stop briefly. Skin may become bluish. Possible loss of bladder or bowel control. Usually lasts 2-4 minutes after which normal breathing returns. Person may be confused and/or tired afterwards and fall into a deep sleep, may complain of sore muscles or bitten tongue.</p>	<p>Move person away from hard, sharp, or hot objects. Put something soft under head. Turn person on one side to keep airway clear.  <b>DON'T</b> put anything in mouth  <b>DON'T</b> try to hold tongue  <b>DON'T</b> restrain movement  <b>DON'T</b> try to give liquids or medicine during or immediately following a seizure  <b>REASSURE</b> when consciousness returns. Usually not necessary to call ambulance if person is known to have epilepsy and seizure ends without difficulty after a minute or two. Call for emergency and if person has a first time seizure, if multiple seizures occur, if one lasts longer than 5 minutes, or if person seems sick injured or unresponsive.</p>
<p><b>ABSENCE (Petit Mal)</b></p>	<p>A blank stare, beginning and ending abruptly, lasting only a few seconds, often occurring frequently. May be accompanied by rapid blinking, upward rolling of eyes and chewing movements. Person may drop what they are holding. Is out of touch during seizure, but returns to full awareness once it stops. Condition may result in learning or behavior problems if not recognized and treated. Often mistaken for day dreaming.</p>	<p>No first aid necessary, but if this is the first observation, physician referral is recommended.</p>
<p><b>SIMPLE PARTIAL</b></p>	<p>Jerking begins in fingers, toes or other parts of the body. Can't be stopped by the person. Person remains awake and aware. Jerking may spread and become a convulsion. Partial sensory seizures may not be obvious to an onlooker, but person may report experiences that suggest his senses are being affected. May "see" or "hear" things that aren't there. May feel sudden fear, sadness, anger or joy. May have nausea, report odd smells, have a "funny" feeling in his stomach or sudden pain. May feel confused and sleepy afterwards.</p>	<p>Observe person carefully.   <b>REASSURE</b> person if frightened or confused.            If seizure spreads to a convulsion, handle as noted above.</p>
<p><b>COMPLEX PARTIAL</b></p>	<p>Often starts with a blank stare, followed by chewing and repeated movements that seem out of place and mechanical. Person unaware of surroundings. May mumble and seem dazed, may pick at clothes, pickup and put down objects, try to take clothes off. May run, appear afraid. May struggle or fail at restraint. Once established, same pattern of actions usually occur with each seizure. Last 2-4 minutes, but person may remain frightened and confused for longer time afterwards. No memory of what happened during seizure. May be mistaken for behavior problem or alcohol-drug induced behavior.</p>	<p>Speak calmly and reassuringly to the person. If the person is walking, guide him gently away from hazards. Stay close by until the seizure has ended and person is completely aware and can respond normally when spoken to. If a first occurrence, recommend physician referral.</p>
<p><b>ATONIC (Drop Attacks)</b></p>	<p>Sudden loss of muscle tone makes person collapse and fall. After a few seconds to a minute he recovers, regains consciousness and can stand and walk again. Person may have to wear head protection to prevent injury from sudden falls.</p>	<p><b>REASSURE</b> person and check to see if any injuries occurred from the fall. If a first occurrence recommend a physician referral.</p>
<p><b>INFANTILE SPASMS</b></p>	<p>Sudden brief muscle jerks. May be mild and affect only part of the body, or massive enough to throw the person abruptly to the floor.</p>	<p>Comfort person if injured, Person should have thorough medical evaluation if first time seizure.</p>
<p><b>MYOCLONIC</b></p>	<p>Quick sudden jerking movements that start between age three months and three years. If a child is sitting up, the head will fall abruptly forward as if bowing, and the arms will flex forward. If lying down, the knees will be drawn up suddenly, with arms and head flexed forward, as if the baby is reaching for support.</p>	<p>Look for clusters of incidents.            Comfort child when incidents occur.</p>