EPILEPSY AND LEISURE

Swimming and Epilepsy

For the sake of their own safety, people should learn to swim. People with epilepsy, and especially children, are subjected to all sorts of restrictions and it is particularly valuable for a sport like swimming to remain open to them. Some children with epilepsy have poor co-ordination which makes many sports difficult, so swimming is of even greater benefit to them.

How dangerous is a seizure in the water?

Under controlled conditions it is minimal. Fatal or even serious accidents are rare, but have been known to occur. Studies in Australia and Hawaii show the absolute risk of drowning as a result of an epileptic seizure is low, though children who are mentally or physically handicapped are at a greater risk.

How can swimming be made safe for people with epilepsy?

By recognising the problem. Allow them to swim only if accompanied by a responsible companion, i.e., someone who is strong and capable swimmer (and preferably is a qualified lifesaver). The companion should also be able to recognise a seizure immediately it starts and must be physically capable of supporting the person he is responsible for in deep water, or the bather should be restricted to helper’s standing depth.

How can a seizure be recognised in the water?

Watch for loss of co-ordinated movement. Some people with epilepsy continue the activity they were performing in the early stages of the attack, but their stroke becomes unco-ordinated and starts to break up. Direction becomes vague and involuntary head movements may start.

How can a seizure be dealt with?

First priority is to keep the face above water, and it is best to approach the swimmer from behind. If it is possible, tow him to shallow water and hold his head until the attack passes. He will do less damage to himself in water than on land if his breathing is functioning.

However, after the convulsion is over the swimmer should be removed from the poolside. If breathing has stopped, normal resuscitation measures should be taken. Close surveillance of someone liable to tonic-clonic seizures is especially necessary, and familiarity with the particular type of seizure is obviously desirable on the part of the companion. Absence seizures are brief, but the swimmer may suddenly sink. Staff should be familiar with first aid measures in case of tonic-clonic seizures.
Is medical assistance necessary?

No, provided resuscitation is not required, there is no injury and one seizure does not follow another without the person regaining consciousness in between (status epilepticus). This is rare, but when it does occur it is a medical emergency and help should be summoned immediately.

General Points

1. It is interesting to note that very few seizures occur in the water.
2. Somebody should be watching both the person with epilepsy and the companion. If the latter cannot lifesave, this is even more important, unless both are restricted to the helper's depth, as recommended earlier.
3. In some circumstances it may be better for the companion to remain on the poolside, as he will have a clearer view and may be able to reach a person more quickly, unless he remains very close at hand.
4. Two useful points for the people with epilepsy to observe are:
   - to avoid swimming when feeling unwell
   - to choose a quit time in the pool to avoid, those periods such as weekends and bank holidays when there are likely to be crowds. It is worth remembering that many swimming pools have special sessions for the handicapped, but because of the stigma attached to epilepsy and the reluctance of many people to admit to it publicly, it is difficult to ensure that everyone with epilepsy uses public swimming pools in these sessions.
5. If the swimmer can be persuaded to wear a brightly coloured swimming cap, this should be encouraged, but again one cannot help feeling that many adults would not be willing to draw attention to themselves in this way.

Water Sports

Sailing canoeing and windsurfing also need not be ruled out provided that there is someone on hand to manage the seizure if necessary. Other more dangerous water sports such as sub-acqua diving, involve much greater risks and are not advised.

Discos and Nightclubs

Going to discos and nightclubs is often part of the social life of many young people. Generally, it is only strobe lights which may trigger a seizure in people who have 'photosensitive epilepsy'. This form of epilepsy is rare and can be diagnosed during a routine EEG test and is usually easily controlled by medication. Where strobe lighting is unavoidable, covering one eye will reduce the photosensitive effect.

Television and Computer Games
Electronic screens are widely used in our daily life and they may sometimes cause problems for those with uncontrolled photosensitive epilepsy. Taking regular breaks away from the screen is recommended and simple precautions can reduce the risk of seizures further: a fact sheet is available from the NSE.

Social drinking

For most people with epilepsy who take anti-epileptic medication the occasional alcoholic drink causes no problems. However, over-indulgence in alcohol has been known to cause seizures and so heavy drinking is best avoided.

Travel

When flying it is advisable to inform the cabin crew of the likelihood of seizures but if someone is very anxious or excited about flying or is tired due to ‘jetlag’ this may trigger a seizure. It is important that you have sufficient medication to cover the time away as there may be difficulty in obtaining medication abroad. Brand names are often different and formulations may vary from country to country. It is advisable to carry written information about epilepsy and the drugs being taken.