



Health & Safety Alert #43-11-07

Status Epilepticus

Background

Traditionally, status epilepticus was defined as 30 minutes of continuous seizure activity or a series of seizures without return to full consciousness between seizures. According to the literature, 50,000 to 200,000 cases of status epilepticus occur per year. The overall mortality rate is about 20% with the cause of death most often related to brain injury. It is now known that a period as short as 5 minutes of continuous seizure activity can cause brain injury and that the self-termination of a seizure is unlikely after 5 minutes.

Alert

The need to respond quickly when someone goes into continuous, generalized, convulsive seizure activity is now clear in the literature. County boards, provider agencies, and others need to examine their guidelines or develop guidelines to lessen the response time to 5 to 10 minutes before intervening.

The most common intervention prescribed by a doctor in a non-hospital setting is Diazepam (Valium) or Lorazepam (Ativan). Currently, the medication administration certification class offered to MR/DD personnel teaches the use of rectal Valium (Diastat). Please note that the ability to use rectal Valium may vary based upon the Doctor's Order and you should check with your delegated nurse.

Alerts are issued as general guidelines. We recognize there may be instances when a physician or neurologist has Doctor's Orders that may differ. It is always important to have the physician review and provide guidance regarding any changes.

The information on this topic was obtained from a number of physicians as well as extracting information from the following internet website: <http://www.emedicine.com>. For additional information on this topic, we would suggest visiting the website.

Additional questions can be directed to the MUI/Registry Unit at (614) 995-3810.

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