PARENTING CHILDREN WITH EPILEPSY

HOW CAN I CREATE SELF ESTEEM IN MY CHILD?
Focus on what your child with epilepsy can do, enjoys doing, and does well, rather than what he or she cannot do. Friendships should be encouraged and maintained. Parents should communicate openly and honestly with their children, allowing them to ask questions about their condition to prevent any shameful or embarrassed feelings from developing.

CAN MY CHILD HAVE FRIENDS?
Yes, friendships and social contact are encouraged. It is important to understand that overprotection and excessive concern by parents of children with epilepsy may isolate them, causing children to withdraw and reduce social activity.

HOW CAN I CREATE NORMALCY IN MY CHILD’S LIFE?
Teach your child that feelings of being different are something many children experience. Parents must also balance their child’s need to be independent with the need to keep them safe. They should be encouraged to participate in safe activities they enjoy. Children with epilepsy should still be disciplined.

CAN MY CHILD PLAY GAMES OR SPORTS?
Yes, exercise and participation in sports are both beneficial and encouraged. Activities with little or no risk in which extra supervision is not needed include jogging (notify someone as to planned route and duration of run), aerobics, cross-country skiing, dancing, hiking, golf, ping-pong, bowling, soccer, field hockey (wear a helmet), most track and field events, tennis, and baseball (wear a helmet). Activities with moderate risk during which direct supervision is recommended include climbing a tree or jungle gym (have a spotter), swimming, horseback riding (wear a helmet), bike or skate-board riding (wear a helmet and avoid busy roads), canoeing (wear a life vest and helmet), ice skating or hockey (wear a helmet), gymnastics (always have a spotter), roller-blading (wear a helmet), downhill snow-skiing (wear a helmet) and football (wear a helmet). High risk activities to avoid include mountain or rock climbing, bungee jumping, scuba diving, skydiving, motor-racing, cave exploring, boxing, aviation and hang gliding. Direct adult supervision is required at all times when handling firearms. Many activities involved in hunting (early morning hunts, solitary hunting, climbing heights, distance from emergency assistance) place children with epilepsy at risk of injury. Please discuss this with your child neurologist before taking your child hunting.
CAN MY CHILD GO TO SCHOOL LIKE OTHER CHILDREN?
Yes. However, the school should be notified that your child has epilepsy so that they will not be surprised if a seizure occurs. If your child needs medication administered during school hours, a permission slip and instructions may be necessary.

IS THERE ANY ACTIVITY MY CHILD IS NOT ALLOWED TO DO?
Children with epilepsy should NEVER bathe without constant supervision. Older children should take showers. All children should be supervised while swimming or near water. Risk for injury is also present near traffic, on elevated structures, or in any setting in which sudden loss of awareness could be dangerous.

WILL MY CHILD EVER BE SEIZURE FREE?
Many children experience seizure freedom on anti-epileptic medication therapy and some types of epilepsy are outgrown. Your child’s neurologist should be able to provide you with information regarding the possibility of this depending on the type of epilepsy your child has.

WHO SHOULD I INFORM ABOUT MY CHILD’S SEIZURES
School teachers, school nurses, babysitters/care-providers, lifeguards, swimming instructors, coaches, as well as friends and family members.

HOW CAN I HELP MY CHILD’S SIBLINGS BUILD A RELATIONSHIP WITH HIM OR HER?
It is not uncommon for siblings of children with epilepsy to feel resentment towards the child with epilepsy based on the amount of attention he or she may receive from their parents. Alternatively, siblings might feel at fault or fear they too will develop seizures. Parents should encourage siblings to discuss their feelings openly. Sibling support groups may also provide an opportunity for feelings to be discussed and to provide support. It is important parents demonstrate and reinforce attention and caring feelings towards all their children.

HOW CAN I TALK TO MY CHILD AND HIS OR HER SIBLINGS ABOUT HER SEIZURES?
Parents should communicate openly and honestly. Children may have misconceptions and should be provided with an opportunity to ask questions or address fears.

CAN MY CHILD WITH EPILEPSY GO TO SUMMER CAMP?
Yes, attendance at an epilepsy camp is encouraged. Information about epilepsy camps can be found at the Epilepsy Foundation of Virginia web site: www.EFVA.org or at the Epilepsy Therapy Project web site: www.epilepsy.com
CAN MY CHILD HAVE INTELLECTUAL DISABILITIES ASSOCIATED WITH HIS OR HER SEIZURES?
Seizures do not cause intellectual disabilities. However, many brain conditions that cause seizures also cause intellectual disabilities, which can vary from mild to severe. Developmental assessment and evaluation of school performance should be performed in children with epilepsy to determine whether cognitive and/or learning problems are present.

CAN MY CHILD HAVE BEHAVIORAL ISSUES OR MENTAL HEALTH PROBLEMS BECAUSE OF HIS OR HER SEIZURES?
Behavioral and mental heath issues, including attention deficit disorder alone or with hyperactivity, depression, anxiety and negative behaviors can occur in patients with epilepsy. Medications and behavioral therapy can be helpful to address and treat these issues. Often, psychiatrists or psychologists are the best health care providers for these problems.

CAN MY CHILD HAVE LEARNING PROBLEMS?
Yes, learning difficulties can be associated with epilepsy. Issues with learning range from mild to severe depending on diagnosis, age of seizure onset and seizure control. Some antiepileptic medications can also impact a child’s ability to learn. Educators, families and medical providers should work together to address your child’s specific needs.