

Epilepsy St. John's

Epilepsy St. John's - Epilepsy is an ancient Greek word that literally translates to "seizure." This common neurological disorder is typified by seizures that are generally signs or transient indications of abnormal, excessive or hyper-synchronous neuronal activity in the brain. Epilepsy usually takes place in young children or those people who are over the age of 65, though, it can occur at whatever time. All around the globe, over fifty million individuals have epilepsy. Approximately 2 out of every 3 cases are discovered in developing countries. Epileptic seizures may also result as a consequence of brain surgery and people recovering from such operation may experience them.

The condition of epilepsy is normally controlled with medication, even though it is not cured in this manner. Even on the best medications, over thirty percent of patients with epilepsy do not have seizure control. In several cases, a surgical procedure could be considered difficult. In numerous cases, not all epilepsy syndromes are considered permanent. Several kinds are confined to particular phases of childhood.

The disorder of epilepsy should not be just considered one single disorder. On the other hand, it must be noted as a syndrome with variously divergent signs which involve episodic abnormal electrical activity within the brain. Seizure types are organized firstly according to whether the source of the seizure is localized as in partial or focal onset seizures or whether they are more generalized or distributed seizures.

On to the extent in which area of consciousness is affected, partial seizures are further divided. If it is unaffected for example, then it is considered a simple partial seizure. Otherwise, it is referred to as a complex partial or complex psychomotor seizure. Secondary generalization is the term when a partial seizure can spread in the brain. Generalized seizures involve loss of consciousness and are divided based on the effect on the body. These comprise grand mal or tonic clonic, atonic, myoclonic, tonic or clonic or petit mal seizures.

Children will sometimes exhibit certain behaviours which are easily mistaken for epileptic seizures, yet they are not really caused by epilepsy. These behaviours consist of: benign shudders, inattentive staring, self gratification behaviours like for example nodding and rocking, head banging, conversion disorder, which is jerking and flailing of the head normally in response to intense personal stress as such will incur in a situation of physical abuse. Conversion disorder could be distinguished from epilepsy since the episodes do not comprise self-injury, incontinence or happen during sleep.

Epilepsy Syndromes

Just as there are types of seizures, there are numerous different kinds of epilepsy syndromes. The classifications comprise information about the patient and about the episodes, in addition to the seizure type. It also includes clinical features and expected causes like behaviour during the seizure.

Epilepsy includes over 40 different types, some of which are: Landau-Kleffner syndrome, frontal lobe epilepsy, juvenile myoclonic epilepsy, childhood absence epilepsy, LennoxGastaut syndrome, infantile spasms, status epilepticus, limbic epilepsy, abdominal epilepsy, Rett syndrome, temporal lobe epilepsy, limbic epilepsy, Jacksonian seizure disorder, Lafora disease and photosensitive epilepsy, amongst others.

Each and every different epilepsy type presents with its own EEG findings, usual age of onset, unique combination of seizure kind, own types of prognosis and treatment. The most common classification of the different types of epilepsies divides epilepsy syndromes by distribution of seizures and by location. This is determined by how the seizures appear, by EEG and by cause. Syndromes are divided into localization-related epilepsies, epilepsies of unknown localization and generalized epilepsies.

Localization-related epilepsies are usually known as focal or partial epilepsies. These variations have an epileptic focus, which is a tiny part of the brain that drives the epileptic response. In contrast, generalized epilepsies occur from numerous independent foci and are referred to as multifocal epilepsies. These could comprise epileptic circuits that affect the entire brain. At this time it has not been determined whether epilepsies of unknown localization arise from more widespread circuits or from a portion of the brain.