

# Self management plays important role in controlling epilepsy

DR ALIM AKHTER BHUIYAN

Epilepsy is a family of more than 40 neurological conditions that share a common symptom – seizure. It can be resulted from head injury, infection, fever, brain tumors, or other trauma that damage the brain.

Normally, brain cells communicate with each other through electrical impulses that work together to control the body's movements and keep the body's organs functioning properly. When thousands to millions of electrical impulses occur at the same time producing abnormal brain electrical activity, the result can be a seizure.

Some people have seizures that last a short time and cause them to stare off into space, giving the appearance that the person is simply daydreaming. Others may experience a more dramatic seizure (tonic-clonic seizure) where the person loses consciousness and the entire body stiffens and then twitches or jerks uncontrollably.

It is not contagious, and it is not a mental illness. Most forms of epilepsy are not inherited, but it may run in some families.

While there is, as yet, no cure for epilepsy, today's treatment options can control most cases. In fact, many people with epilepsy lead normal life and have no symptoms between seizures. The aim of treatment is to stop the seizures.

## Symptoms

The medical community classifies epileptic seizures into two major categories: partial and generalized.

**Partial seizures:** If the abnormal electrical activity involves one area of the brain, the seizure is partial. The person may not lose consciousness, but can experience a range of symptoms: sudden jerk movements of one part of the body, such as an arm or leg; sudden fear; facial movements; disturbances or hallucinations of vision, hearing, or smell; nausea, vomiting or stomach discomfort.

Some types of partial seizures (called complex partial seizures) may cause the person to have a change of consciousness. They may be dazed and confused, unaware of where they are or what they are doing. They may wander around randomly, mumble, and behave in unusual ways. They may exhibit chewing or repetitive arm and hand movements. Moreover, people with this type of seizure will not remember what they have experienced.

**Generalised seizures:** When the entire brain is involved, the seizure is generalised. Like partial seizures, there are many different symptoms, body movements, and activities. Some people stare off into space, while others may have full convulsion with the complete loss of consciousness and jerking movements of



limbs (tonic-clonic seizures).

Just before having seizures, some people experience an aura, which is a sensation or warning of a coming seizure. Some people feel a sense of tension or anxiety, may hear a musical sound, sense an odor or taste, or experience some other change in sensation. Often this aura gives the person time to get to a safe place to avoid injury.

## What causes epilepsy?

There is no single cause of epilepsy, and in 70 percent of cases, no known cause is ever found.

- Some of the known cause of epilepsy are:
- Injury to the brain before, during, or after birth.
  - Infections that damage the brain.
  - Injury and lack of oxygen to the brain.
  - Disturbance in blood circulation to the brain (stroke & other vascular problems).
  - Metabolism or nutrition imbalance.
  - Tumors of the brain.
  - Hereditary disease affecting the brain.
  - High fever.
  - Other degenerative diseases.

## Treatment

Most major epileptic seizures (generalised or tonic-clonic) last only a minute or two and demand little of the bystander. All that is necessary is to let seizure run its course and to ensure that the person is in no physical danger and can breathe.

However, a person who experiences repeated seizures and does not recover consciousness between attacks should get immediate medical attention. This type of repeated

seizure medical attention. This type of repeated seizure is called status epilepticus. This is life threatening, and could also cause brain damage.

## First aid

The goal of first aid is to keep the person safe:

- Keep calm, help the person to the floor, and loosen clothing around the neck
- Remove sharp or hot objects that could injure
- Turn the person on one side so saliva can flow out of the mouth
- Place a cushion such as a folded coat under the head
- Do not put anything into the person's mouth
- After the seizure, allow the person to rest or sleep if necessary

Some people will be confused or weak after a seizure. They need help getting home

Contact the parent or guardian if a child had the seizure

The most common treatment of epilepsy is daily use of anti-convulsant drugs, which allow many people with epilepsy to enjoy a healthy life and continue normal activities. The drugs prescribed alone or in combination, are adjusted over time until the best combination is found for each person. Many people with epilepsy must take their anti-convulsant drugs for the rest of their lives to prevent further seizures. However, the doctor may advise a slow withdrawal of the drug if a person has had no seizures for several years.

Those for whom anti-convulsant drugs fail to control the seizure, surgery to remove injured brain tissue maybe possible. A thorough evaluation including the recording of a seizure with EEG, video and neuropsychological testing is performed to determine surgical candidacy. Other surgical techniques are being developed that offer new hope to people with uncontrollable epilepsy.

Epilepsy treatment should include discussions about the physical (e.g. side-effects), social, and emotional problems that can accompany the disorder. These discussions should involve family and individual counseling and education. In addition, information about epilepsy should be shared with schools, employers, and friends. Women with epilepsy should seek medical counseling prior to and during pregnancy. Some countries or state regulations mandate that person suffer altered consciousness due to a seizure abstain from driving a motor vehicle for a specific period thereafter.

The writer is a Consultant Neurologist of Apollo Hospitals, Dhaka.

# Keeping safe high risk pregnancies

A fetomaternal medicine specialist (who deals with the health concern of mother and upcoming baby) is capable of dealing with high risk mothers. In our country, only Bangabandhu Sheikh Mujib Medical University (BSMMU) has specilised Fetomaternal Medicine Department. For the last two years this department has been serving the high risk mothers taking special care.

PROF DR FIROZA BEGUM and  
DR KANIZ FATEMA

When a woman becomes pregnant, she herself and all her family members eagerly wait for a beautiful and healthy baby. But it is difficult to say that both the mother and baby will certainly be safe just even before delivery.

Sometimes serious complication arises at delivery despite uneventful full term pregnancy. In this sense every pregnancy is risky.

In many circumstances, pregnancy becomes highly risky. It may cause death of the mother as well as of the baby. Risky mothers should be diagnosed as early as possible. They need appropriate attention and proper treatment. A fetomaternal medicine specialist (who deals with the health concern of mother and upcoming baby) is capable of dealing with this high risk mothers. In our country, only Bangabandhu Sheikh Mujib Medical University (BSMMU) has Fetomaternal Medicine Department. For the last two years this department has been serving the high risk mothers taking special care.

## What is high risk pregnancy?

There are several mothers who suffer from hypertension before conception. These high risk mothers suffer from preclampsia, eclampsia, preterm delivery etc. They even may die for these complications. But with simple measures we can avoid this unwanted death.

## Diabetes

Pregnancy impasses a heavy burden to the patient who is diabetic. Diabetic women have a higher risk of developing pre-eclampsia, abortion, preterm deliveries. In conse-



Prof Dr Firoza Begum (left) with other doctors examining a patient at the Fetomaternal Medicine Department of BSMMU.

quences, these upcoming babies are in more risk than mother. Such as fetal congenital abnormalities, intrauterine death, growth retardation, macrosomian (a newborn with an excessive birth weight). These mothers need frequent monitoring, strict therapy and highly regulated life style.

## Cardiac disease and pregnancy

Pregnancy causes significant changes in cardiovascular physiology. The haemodynamic changes that occur during

pregnancy have a profound effect on the patient with cardiovascular disease.

## Renal disease and pregnancy

Mothers with pre-existing kidney disease suffer from severe hypertension. Their pregnancy become complicated with kidney failure. It may cause death , preterm delivery. The majority of infant have low birth weight.

## Repeated abortion

Mothers who have experienced repeated abortion need more extensive investigations. After finding the specific cause, proper treatment and precaution should be ensured.

## Birth defect of babies

It is a very common problem in our country. In most cases babies born with severe birth defect and die just after their birth. Among them, which babies survive need sophisticated and expensive treatment. In most cases parents cannot avail the cost and in some cases treatment is not available in our country. So mothers who are at high risk of having babies with birth defects need through medical examinations and special precautions before conception.

A beautiful healthy baby is women's ever dream. But there are many women who are deprived from even having a child. Giving birth of a defected baby is more painful than pain during pregnancy. Fetomaternal medicine unit in many respect can reduces the risk of those high risk mothers and takes responsibilities of giving birth a healthy baby and keep the mother fit.

Prof Dr Firoza Begum is a Professor of Fetomaternal Medicine Department of BSMMU and Dr Kaniz Fatema is a fellow physician of the same department.

# Introducing newer vaccines to give more protection to your child

DR M KARIM KHAN

Vaccines are for protection against different infectious diseases. Achievement of EPI programme in Bangladesh is highly praised nationally and internationally. Success of EPI programme has definitely a major role in decreasing infant mortality rate in Bangladesh. In EPI vaccination schedule, main seven diseases are covered namely Tuberculosis, Polio, Diphtheria, Whooping cough, Tetanus, Measles and Hepatitis B.

Now in Bangladesh other few newer vaccines are also available in private sector. Most of the good private clinics and chamber of the pediatricians has vaccination facilities. In this article the newer vaccines those are available in our country will be described.

MMR means Measles, Mumps, Rubella. It is indeed a very important vaccine. By giving this vaccine children's are not only protected from Measles but they are also protected from Mumps (Viral Parotitis) and Rubella ( German measles). This Rubella vaccine is particularly very much important for female child because, if a pregnant lady gets infected with Rubella in the early part of her pregnancy, her child is likely to

develop many congenital anomalies and the child may die in the uterus. All these problems can be overcome by giving MMR vaccination.

Hib vaccine means Hemophilus influenza b vaccine. This is also a very important vaccine. By giving this vaccine child can be protected from Pneumonia and Meningitis produced

by Hemophilus influenza bacteria.

Typhoid vaccine is given to children to protect them from Typhoid fever, which is a very common disease in our country and spread by consuming contaminated water and food.

Chicken pox vaccine is also available in our country. Most of the time chicken pox is not a

serious disease but if it occurs during exam period, may spoil your kids exam. So give this vaccine to your kids as soon as possible.

Vaccine against Hepatitis A are also quite important vaccine for our country, as this disease is very common and spreads through contaminated food and water i.e. poor personal hygiene is responsible for the disease.

One of the newer vaccine is combination vaccine, which includes DPT and Hepatitis B vaccine. The advantage of this vaccine is to reduce the number of needle prick. If you give separately DPT and Hepatitis B vaccine you have to prick.

Other vaccine like Pneumococcal, Meningococcal, Rabies vaccines are also available in our country though they are not given routinely.

We all try to give our beloved children the best food, best education; then why should we not try for better protection of our children by giving those newer vaccines.

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## Health Tips

### EMERGENCY CONTRACEPTIVE PILL

# A backup support of contraception



SALAHUDDIN AHMED

Unwanted pregnancy is a major leakage of our family planning management and population control. From one study we learnt that more than 24 lac married couples are using only traditional methods like calendar method. So they are in risk for undesired pregnancy. All categories or groups of the married couple have a chance occurring unwanted pregnancy. It can happen frequently. In this circumstance emergency contraceptive pill may be helpful.

Emergency contraceptive pill (ECP) is an emergency contraception option as a backup support for the regular family planning methods. ECP is not a regular useable contraception pill. If taken within 72 hours of unprotected physical intercourse, it prevents pregnancy to happen.

## When to take

- (a) If there is leaking of condom during physical intercourse.
- (b) If somebody forgets to take oral contraceptive pills for three consecutive days.
- (c) If taking of family planning injection is delayed for 14 days.
- (d) If miscalculation happens while counting safe period.

## How to take

- (i) Two doses of ECP have to be taken.
- (ii) The first dose has to be taken within 72 hours of the physical intercourse. However the sooner it is taken the better its effectiveness.
- (iii) The second dose has to be taken after 12 hours of taking the first dose.

However, research shows that ECP is safe for all women. It is even safe for those women who might have complications with regular contraceptive pill. The probability of pregnancy form an unprotected sex is 8 out of 100.

## Key messages of ECP

- (i) By taking ECP within 72 hours after unprotected physical intercourse, unplanned pregnancy can be prevented.
- (ii) ECP is not an alternative to regular contraceptive pills.
- (iii) ECP is only for women.
- (iv) ECP is neither an abortion nor a regularly useable contraceptive method.

It should be prohibited in young girls. We should be conscious about misuse of ECP in the name of birth control.

The writer is Deputy Director of Population Health and Nutrition Cell, Bangladesh Betar, Dhaka.

## Rural living easier on lungs

Living in the country may be good for respiratory health, according to a study conducted in Scotland, which suggests that rural as opposed to urban dwelling is associated with a lower prevalence of asthma.

Moreover, while the prevalence of COPD (chronic obstructive pulmonary disease) and emphysema, which are caused primarily by smoking, is similar among country and city dwellers, living in the country appears to be associated with better health status among subjects with these two lung ailments, the study hints.

In analysing the data of the study, the investigators discovered that the prevalence of "any" lung illness was 28-percent lower among those living in the country compared with those living in cities.

The prevalence of asthma was 41-percent lower among the rural

residents compared with the city dwellers, whereas the prevalence of eczema / dermatitis was 33-percent lower in the country.

Fewer people living in rural areas reported symptoms indicative of asthma such as persistent cough and phlegm and breathlessness and wheeze.

People living in the country who suffered from COPD, emphysema, or cough or phlegm symptoms had markedly better quality of life scores than their urban counterparts.

So why do country dwellers appear to breathe easier? The authors say the current study "prevents us from distinguishing between cause and effect in any relationships found."

Source: CHEST



Dr Faruq Ahmed  
Gastroenterologist  
Sir Salimullah Medical College and Mitford Hospital, Dhaka

Dear Doctor,  
I had my gallbladder removed. I watch my diet but continue to have diarrhoea. Is this common? What can I do about it?

Regards  
Abdullah Al Mamun, Dhaka.

## Answer:

As many as 20 percent people who have surgery to remove their gallbladders (cholecystectomy) develop diarrhoea. The diarrhoea may last for many days. But it often improves over time – even without treatment.

The main function of the gallbladder is to store bile, a digestive fluid produced by the liver. After a meal, the gallbladder empties bile into your small intestine to help break down fats.

When the gallbladder is removed, the bile is no longer stored but goes directly into the intestines. The small intestine absorbs most of the bile as it

passes through. But some bile still reaches the large intestine, which interferes with its ability to absorb water. As a result, the excess bile acts as a laxative.

There is no evidence that additional changes to your diet will improve diarrhoea due to gallbladder removal. But you may want to limit foods that typically worsen diarrhoea, including spicy foods, dairy products, fatty foods, caffeine, alcohol.

But you should consult with a doctor before making any changes to your diet or medications.

Dear Doctor,  
I am a 30-year-old male. Recently, I had a CT scan and doctor told me that I have an enlarged pancreas. What does that mean? Is this serious?

## Regards

Ershadul Hoque, Sylhet

## Answer:

Finding of an enlarged pancreas may mean nothing. Your pancreas may simply be larger than average but still normal. However, in some cases, an enlarged pancreas may be a sign of an underlying problem, such as pancreatitis or pancreatic cancer.

The significance of an enlarged pancreas depends on many factors, including signs and symptoms and other findings on the CT scan. It is important to consult with a physician the importance of an enlarged pancreas in your specific situation. If the doctor is concerned, further evaluation may be required to determine the cause of an enlarged pancreas.