

Trust Headquarters
Russells Hall Hospital
Dudley
West Midlands
DY1 2HQ

FREEDOM OF INFORMATION ACT 2000 - Ref: FOI/011068

With reference to your FOI request that was received on 26/01/2012 in connection with 'Cluster Seizures

Your request for information has now been considered and the information requested is enclosed

Further information about your rights is also available from the Information Commissioner at:

Information Commissioner

Wycliffe House
Water Lane
Wilmslow
Cheshire SK9 5AF
Tel: 0303 123 1113
Fax: 01625 524510
www.ico.gov.uk

Yours sincerely

Information Governance Manager
Room 34a, First Floor, Esk House, Russells Hall Hospital, Dudley, DY1 2HQ
Email: FOI@dgh.nhs.uk

Response:

The responses to your request, below, are from the emergency service point of view and represents a combined answer from the Emergency Assessment Unit, Emergency Department and Neurology as some parts cannot be answered from one area only

- When a patient enters A&E department with cluster seizures how long do the department leave the patient fitting before the decision is decided to abort the seizures?

This depends on how long the patient has been fitting prior to attendance but if they are actively fitting for more than 30 seconds- 1minute then treatment is offered.

- What medication does the trust give for aborting the seizures?

The Trust gives Intravenous benzodiazepines for aborting seizures

If the trust suspect the patient may be having pseudo seizures does the trust;

- Do a pain reactive test to see if the patient react to pain?

The Trust does not do a pain reactive test to see if the patient reacts to pain.

- Does the trust call the duty psychiatric down to assess the mental state of the patient?

No, the Trust does not call the duty psychiatric down to assess the mental state of the patient. The patient would be treated as if they are having regular seizures and ongoing management would be as appropriate for the presentation

Where there is a case in a patient presents as unusual seizures;

- What are the clinical signs of the seizures?

Could you possibly clarify your question please?

- Does the trust discuss with the patient they are unusual the patient needs to see neurology?

The Trust aims to involve patients as much as possible in their own care. Each case is individual. Referrals would be made to neurology for most patients with unexplained fits or blackouts, this could be before the patient is discharged or as an out-patient depending on the urgency.

- Does the trust discharge the patient diagnosing them as pseudo seizures

Pseudo-seizures is another term for non-epileptic seizures. They are episodes that resemble epileptic seizures.

Patients who fit that description can be discharged with a diagnosis of pseudo-seizures. Diagnosis is not made in A&E unless it is known that a particular patient has Non-epileptic attacks and presents with one of his or hers typical attack.