



Physiotherapy for Epilepsy Patients

Gary LK Shum*

Department of Sport & Health Sciences, Plymouth Marjon University, UK

*Corresponding Author: Gary LK Shum, Department of Sport & Health Sciences, Plymouth Marjon University, UK, Tel: 01752 636700 E-mail: gshum@marjon.ac.uk

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Epilepsy is a category of neurological disorders in which frequent epileptic seizures are described. Epileptic seizures are symptoms that can range from short and almost undetectable intervals to vigorous trembling over long periods. Physical injuries, including sometimes broken bones, may result from these episodes. Seizures appear to recur in epilepsy and as a rule, have no immediate underlying cause. Epilepsy is not thought to reflect isolated seizures caused by a single cause, such as poisoning. In various parts of the world, people with epilepsy can be treated differently and face varying degrees of social stigma due to their illness. Excessive and irregular neural activity in the cortex of the brain is the underlying cause of epileptic seizures. The cause this happens is unclear in most cases of epilepsy. Some cases arise through a mechanism known as epileptogenesis, as a result of brain damage, stroke, brain tumors, brain infections, or birth defects. In a small proportion of cases, identified genetic defects are directly related. The diagnosis includes excluding other disorders that may cause similar symptoms, such as fainting, and

deciding if there is another cause of seizures, such as alcohol indirectly by imaging the brain and conducting blood tests.

With an electroencephalogram (EEG), epilepsy may sometimes be confirmed, although a standard examination does not rule out the condition. Epilepsy that develops as a consequence of other problems can be preventable. In about 70% of cases, seizures are controllable with medication; affordable anti-seizure drugs are also available. Surgery, neuro-stimulation or dietary modifications may then be considered in those whose seizures do not respond to medication. Not all epilepsy cases are permanent, and many individuals are progressing to the point where care is no longer needed. In older individuals, epilepsy is more common. The occurrence of new cases happens most often in babies and the elderly in the developing world. The onset is more prominent in older children and young adults in the developed world due to variations in the frequency of the underlying causes. By the age of 80, approximately 5-10% of individuals may experience an unprovoked seizure, and the risk of having a second seizure is between 40% and 50%. In certain parts of the world, people with epilepsy either have limits imposed on their right to drive or are not allowed to drive until they are free of seizures for a specific period of time. Epilepsy is characterized by a risk of frequent seizures over the long term. Depending on the part of the brain involved and the age of the individual, these seizures can be present in many forms.

It is likely that after the operation, epilepsy surgery or other therapies might require recovery and rehabilitation. Neuropsychological rehabilitation may also be required in addition to speech, physical or occupational therapy.