



Brain tumours and seizures

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Introduction

A brain tumour and / or surgery to the brain increases the risk of having a fit or seizures, similar to epilepsy. You may be understandably concerned about this increased risk. Therefore it is as well to be aware of what to expect, even if a seizure never happens.

What are seizures?

A seizure happens when the nerves in the brain have a temporary surge of abnormal activity. This may show itself in a number of ways:

- You may have a warning that something is about to happen, for example, a strange smell, taste or feeling.
- You may be aware of, or have, abnormal movements of the muscles in your face, body or one or more of your arms and legs. Sometimes a brief episode of unexplainable behaviour occurs.
- When there is a loss of consciousness this might be complete, or you may seem to be awake but not aware of your surroundings, or not your usual self for a short time.
- If loss of consciousness occurs, this may be accompanied by abnormal movements of arms and legs, laboured breathing and / or incontinence. **Many people having a seizure do not experience a loss of consciousness**.
- Following the seizure you may seem sleepy, muddled or less alert for some time. You may have a headache. You will need someone with you for safety until you are fully recovered.

Seizures usually stop within a short time, and tend to be similar each time they happen. Seizures that last for more than a few minutes, or which repeatedly happen at very short intervals after each other may require **urgent treatment in hospital**.

Your doctor will need to be told if you start to have seizures, or if you already have seizures and there is a trend of them increasing in frequency or severity.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



Treatment for seizures

Tablets or medications called anticonvulsants are used in controlling seizures. They may control them completely, or reduce their frequency and / or the severity of them.

The type of medication used will depend on the type of seizure you have, and if they can be used with any other medications you are taking. Your GP will usually prescribe this medication, and review how effective it is. Occasionally seizures are more difficult to control, and your doctor may ask a consultant who specialises in epilepsy for advice.

It is important to be able to tell the doctor about what happens if you have a seizure. People who were present at the time will be asked to describe what happened, for example: how long the seizure lasted; if you lost consciousness; whether you reported altered sensations or feelings before the seizures started.

Important

Please make those close to you aware of the following information:

What to do if someone has a seizure and loses consciousness

- Stay calm and stop people crowding round
- Put something soft under the person's head to prevent injury
- Remove their glasses, if worn
- Only move them if you have to do so for their safety, for example if they are on a road or at risk from a fall down stairs
- Do not try to stop the limb from shaking. Let the seizure take its course
- Do not try to put anything in the person's mouth. They will not swallow their tongue and you may break their teeth or be bitten.

After the seizure

- If possible, roll the person onto their side, into the recovery position (see below)
- Wipe their mouth to clear saliva, and check they are able to breathe easily
- Remove any obstruction to the airway, such as food or dentures
- Minimise embarrassment, for example, if the person has been incontinent deal with this as privately as possible
- Stay with them until they are fully recovered
- Only offer them a drink when they are fully recovered
- If you have any concerns call an ambulance



Recovery position



If someone has a seizure where they do not lose consciousness:

- Remain with them
- Do not stop them from moving around unless they are in immediate danger
- Reassure them as they recover

Afterwards

You must let your GP or Neuro-oncology Clinical Nurse Specialist know that you have had a fit, as your medication may need adjusting and you may need further tests.

Contact numbers

Neuro-oncology Clinical Nurse Specialist (key worker)

Telephone: 0116 258 6433 Mobile: 07534 227 963

The nurse is available three days per week, usually Monday, Wednesday and Friday, 8.30am to 4.30pm.

For help and advice 'out of hours'

□ Oncology helpline	0808 1782212 (24 hours)
□ Contact your GP	
□ Call 111	

In an emergency call 999



Further information

Further information about brain tumours and seizures can be obtained from:

Macmillan Information and Support Centre

Osborne Building, Leicester Royal Infirmary LE1 5WW

Telephone: 0116 258 6189

Website: www.leicestershospitals.nhs.uk/cancerinfo

Macmillan Cancer Support

Helpline: 0808 808 00 00

Website: www.macmillan.org.uk

The Brain Tumour Charity

Telephone: 0808 800 0004

Website: www.thebraintumourcharity.org

Brainstrust

UK-based brain tumour support charity

24/7 helpline: 01983 292 405

Website: www.brainstrust.org.uk

The Brain and Spine Foundation

Helpline: 0808 808 1000

Website: www.brainandspine.org.uk

Brain Tumour Action

Helpline: 0131 466 3116

Website: braintumouraction.org.uk

Epilepsy Society

Helpline: 01494 601 400

Website: www.epilepsysociety.org.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخری، الرجاء الاتصال علی رقم الهاتف الذي يظهر في الأسفل જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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