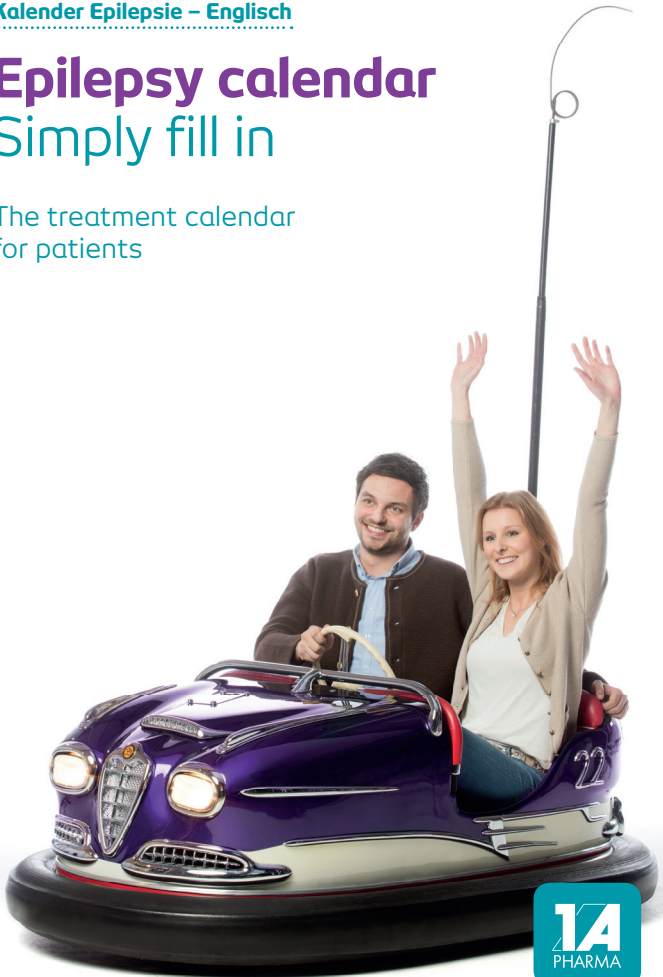


Kalender Epilepsie – Englisch

Epilepsy calendar

Simply fill in

The treatment calendar
for patients



A Sandoz Brand

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Important note for readers

The content-related and scientific information in this guide reflects the current state of information at the time of writing (see back page). This guide is intended to provide an initial overview of the topic. It is not, however, a substitute for advice from a doctor. Please always read the package leaflet that comes with your medicines carefully. For the reasons mentioned, 1 A Pharma GmbH cannot guarantee or accept liability for content or information from this guide.

Key contacts

This epilepsy calendar belongs to

1

.....
Name

.....
Tel. no.

Treating doctor

.....
Name

.....
Tel. no.

In the event of an emergency, please notify

.....
Name

.....
Tel. no.

Dear Reader,

You have been diagnosed with epilepsy by your doctor. Doctors refer to this when a patient has two or more epileptic seizures. It will help your doctor if you yourself note the type of symptoms you get. This is because only those who experience the seizures can assess their intensity.

This is why you have this epilepsy calendar in your hands. As well as listing your medicines, it contains contact addresses in the event of an emergency. Keep the epilepsy calendar with you at all times, if possible. Please bring it with you each time you visit the doctor. Ask your doctor or pharmacist for the supplementary Epilepsy Guide as well.

We wish you every success and all the best for your health.

Best wishes
The 1 A Pharma Team

How can epilepsy be treated effectively?

A person who has more than one seizure a year should be treated. Doctors from different disciplines may be involved: neurologists, paediatricians, paediatric neurologists, internal specialists, general practitioners, neurosurgeons or epileptologists [epilepsy specialists]. Intensive management is possible in large hospitals and outpatient neurology clinics or by community-based neurologists.

Drug therapies

Prescription-only medicines known as "antiepileptic drugs" or "anticonvulsants" are the drugs of first choice. More than 20 different active substances with different benefits and possible side effects are available. Antiepileptic drugs are intended to curb seizures or prevent them from occurring. The active substance and the medicine prescribed, as well as the dosage, depend on the individual.

About 60 to 70 percent of patients can be treated successfully with medicines. They can live a largely normal life. Treatment with a medicine is often sufficient.

Important

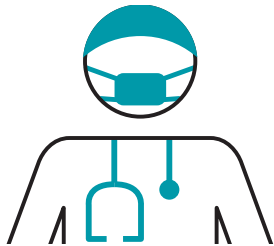
Never stop taking antiepileptic drugs without consulting your doctor - even if you now feel better. Do not stop the drug treatment suddenly, even after consulting the doctor, but rather discontinue the antiepileptic drugs gradually over a prolonged period of time.

Non-drug therapies

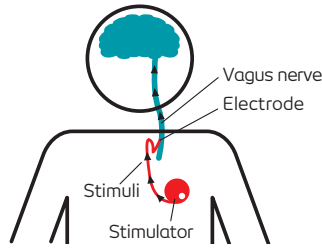
In some patients, epileptic seizures cannot be controlled by medication. Additional non-drug therapy is often of help to them.

Non-drug treatments include:

- Surgery
- Vagus nerve stimulator

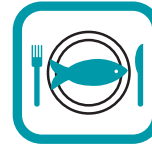


Surgery



Vagus nerve stimulator

Changes in lifestyle can also have a beneficial effect on the disease course. This involves the following areas and life situations in particular:



Special diet, e.g. ketogenic diet



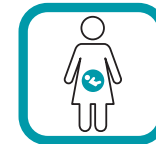
Sport following consultation with the doctor



Remaining vigilant during recreational activities



Where applicable, review of fitness to drive



Information in the event of a desire to have children or pregnancy



Self-management: documentation of seizures

Ask your doctor what you yourself can do specifically.

What can bystanders do if someone has a seizure?

- Keep calm.
- Remove sharp objects. Where applicable, remove the patient's glasses and take any cigarette out of their hand. Place something under their head to prevent it from striking the floor.
- Do not try to open the jaw and force objects between the teeth.
- Loosen any tight clothing, particularly around the neck. Place the patient in a stable position on the side after the seizure. Remain with the patient until he or she is fully oriented.
- The patient may be carrying a medical ID card on them with important information about their condition. The entries in this epilepsy calendar may also help.
- If you are a witness, call a doctor if the seizure lasts more than ten minutes, if it recurs within a period of less than an hour, if the patient does not regain consciousness, or if you suspect a serious injury (call emergency number 112).

When do seizures occur?

Month		Year						Period	Specific characteristics
Day	6 a.m.-10 a.m.	10 a.m.-2 p.m.	2 p.m.-6 p.m.	6 p.m.-10 p.m.	10 p.m.-2 a.m.	2 a.m.-6 a.m.			
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How do I keep the calendar?

It is important to keep your calendar up to date. Please enter the number and type of seizures in the time columns using the following symbols.

- Grand mal (convulsive) seizure
- Grand mal (convulsive) seizure on awakening
- + Petit mal and absence
- Complex partial (psychomotor) seizure

If you are a woman and have your period on the day in question, insert a cross in the relevant column.

Further symbols for specific characteristics

- 1 Previous alcohol consumption
- 2 Missed dose of medication
- 3 Previous sleep deprivation
- 4 Stress
- 5 Tongue biting
- 6 Injuries
- 7 Aura
- 8 Bed wetting
- 9 Bed soiling

Other services of 1 A Pharma

You can order your Epilepsy Guide free of charge (while stocks last) by fax on 089 613882525 or over the Internet at www.1apharma.de/service



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Einfach verstehen.