Alcohol Related Seizures
Information for patients, relatives and carers

For more information, please contact:
Substance Misuse Liaison Service
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Email: substancemisuseliaisonservice@york.nhs.uk
The York Hospital, Wigginton Road, York, YO31 8HE

Caring with pride
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Introduction

This leaflet will provide you with information about alcohol related seizures (fits) and safety advice, which you may find helpful, when discharged from hospital.

What is a seizure?

A seizure (or fit) is a short event that can affect consciousness and cause a convulsion. Some are caused by epilepsy, high fever, a low blood sugar or lack of oxygen, but others can be alcohol related.

A typical alcohol related seizure can cause you to fall to the ground and shake violently for a short amount of time (usually less than five minutes). This is known as a tonic-clonic seizure.

Some people may hurt themselves by banging their heads or limbs, biting tongues or become incontinent of urine whilst having a seizure.

Many people are confused and agitated following a seizure but soon regain full consciousness.
How is the cause of my seizure diagnosed?

Causes of seizures vary and your doctor will need a clear description of your seizure to try to make a diagnosis, although often, no clear diagnosis can be made.

You will be asked what you can remember leading up to and about the event and it is vital that any witnesses also describe what happened. You will also be asked about how much alcohol you drink and when you last had an alcoholic drink before the seizure.

You will need to inform your doctor if this has ever happened before.

What tests will I need?

Whilst in hospital you may have some blood tests and other investigations such as a chest x-ray and a heart tracing (ECG). You may also have a brain scan (CT or MRI scan).

What is an alcohol related seizure?

When someone consumes a lot of alcohol, or when someone whose body is used to having alcohol regularly, suddenly stops or changes their drinking, the brain may react and trigger a seizure.
Alcohol induced seizures

You do not have to be dependent on alcohol to experience an alcohol-induced seizure. Some people may have seizures when they consume a large quantity of alcohol within a short period of time (binge drinking).

Alcohol withdrawal seizures

Regularly drinking a lot of alcohol can cause physical dependence. This means that alcohol withdrawal symptoms may develop if alcohol is suddenly stopped or reduced. Alcohol withdrawal symptoms can occur within six to 12 hours after the last alcoholic drink and are at their most severe 48 - 72 hours after the last drink. These symptoms include:

- Tremor
- Sweating
- Anxiety/ irritability
- Feeling sick or vomiting
- Sleep disturbances
- Headache
- Confusion
- Marked tremor
- Hallucinations
- Seizures (fits)
Alcohol withdrawal seizures usually occur within 24-48 hours of stopping or suddenly reducing drinking. People who have had an alcohol withdrawal seizure in the past are more likely to have another seizure in the future if they suddenly change their drinking pattern.

It can be dangerous to stop drinking suddenly, so to avoid the dangers of severe withdrawal symptoms we strongly recommend seeking medical advice before stopping drinking.

If you are attempting to do this yourself reduce your drinking gradually over the course of several weeks.

Other causes

Alcohol related seizures can be caused when alcohol is mixed with illicit or prescription drugs, including antibiotics.

Head trauma from falls and accidents can also cause seizures; these injuries may be linked to excessive alcohol consumption.

Alcohol may induce seizures in epileptics or those with underlying seizure disorders.
Most people stop drinking without requiring medication, but if you have had a seizure or have severe alcohol withdrawal symptoms, you may be given medication to help with alcohol withdrawal symptoms and reduce the risk of further seizures.

York Hospital

A nurse from the Substance Misuse Liaison Service or the Mental Health Liaison Team may come to see you and/or be involved in planning your treatment. These are a team of specialist nurses who have experience and knowledge of looking after the physical, emotional and social needs of hospital patients with alcohol problems.

You will be able to think about what you want to do about your drinking when discharged home and will be offered specialist community support if you want to stop or change your drinking.

Scarborough Hospital

Whilst you are in hospital an alcohol link worker may come to you to discuss your drinking if identified as drinking above the government’s lower risk guidelines. You may be thinking about changing your alcohol use and we can give you time to talk this through and to think about what changes you want to make. We can offer support and help to reduce your drinking and offer referral to specialist community treatment services.
What happens when I am discharged home?

Some people decide that they want to stop drinking alcohol after being in hospital. If you want to stop drinking, community alcohol services are available to help and support you, details are included at the end of this leaflet.

If you have mild or no alcohol withdrawal symptoms when you go home you may be able to stop drinking immediately. If you choose to do this we suggest you see your GP and contact your local alcohol service for support as soon as possible. If you develop symptoms of alcohol withdrawal which you find difficult to cope with you should seek urgent medical advice.

If you still have significant alcohol withdrawal symptoms when you go home and/or have had seizures before you may need to restart drinking alcohol and reduce slowly over several weeks.
Rarely, you may be offered medication to take home from hospital to use for several days whilst your symptoms of alcohol withdrawal get better. People who go home with this medication (usually called chlordiazepoxide) require regular follow up with specialist community services.

Your doctor or nurse in hospital will discuss this with you before you are discharged. If you have any additional questions please ask.

No seizure medication (for epilepsy) will usually be prescribed unless the seizures continue when alcohol issues have been resolved and alcohol is no longer being consumed.
How to reduce your daily drinking safely

Below are some tips on how to reduce your alcohol intake safely and gradually.

- How much you reduce your drinking is up to you as you are in control. It is important not to cut down so quickly that you end up getting severe withdrawal symptoms, but also not so slowly so that you never stop!

- Once you have worked out how many units a day you drink, try to reduce by ten percent each week.

- **Remember you are drinking to control withdrawal symptoms, not to get intoxicated.**

- Do not assume you have to drink straight away after waking up. Try drinking nothing until you notice withdrawal symptoms.

- Try to drink only when you start to feel yourself withdraw and then drink approximately two units at a time. Wait 20-30 minutes for the alcohol to take effect and repeat this process each time you get withdrawal symptoms.

- If you experience disturbed or disrupted sleep due to withdrawal symptoms, you could try a double dose before bed.
• As you successfully reduce your daily alcohol intake, you should find your withdrawal symptoms become less severe.

• Keeping a daily record of your symptoms may help you keep track of your progress and give you a guide of how much to reduce the next day. There is an example of a diary and unit tracker on page 14.

• If you are having withdrawal symptoms which are making you feel unwell, you may be reducing your intake too quickly. You may find it helpful to discuss this with a health professional as soon as possible.
First Aid advice

You and your family and friends may be concerned about what to do if you have another seizure. Some things that can help are to:

- Loosen any tight clothing around your neck.
- Put a cushion or clothing under your head to protect you.
- Move any hard or sharp objects from around you to stop you getting injured.
- Move you to safety if you are in a dangerous situation (road, fire, water).

Things not to do:

- Try to restrain you or hold you still.
- Put anything in your mouth or between your teeth.
- Try to move you unless you are in danger.
Once the seizure has stopped, they should check that your breathing has returned to normal, if not they may need to check there is nothing blocking your airway such as false teeth, food or vomit. They should then put you in the recovery position:

They should not give you anything to drink until you are fully recovered. They should then seek urgent medical attention by coming to the Emergency Department or dialling 999.
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If you do find you are over the recommended limits (Both men and women should not regularly drink more than 14 units per week spread over three or more days) **you may want to start cutting back**
Driving

All applicants and licence holders have a legal responsibility to inform the Driver and Vehicle Licencing Authority (DVLA) of any injury or illness that would have a likely impact on safe driving ability. Alcohol and drugs have an influence on the brain and will affect driving performance, therefore can seriously affect your ability to drive. It is your responsibility to inform the DVLA if you have problematic alcohol or drug use.

You must not drive after a seizure. You must speak to your GP to find out more about driving following a seizure or contact the DVLA directly.

The DVLA will then make a decision on your fitness to drive and may request medical information.

DVLA contact details:
Tel: 0800 790 6806
Email: eftd@dvla.gsi.gov.uk
Address: Drivers’ Medical Enquiries, DVLA, Swansea, SA99 1TU
Where can I get more help?

**Drinkline:** 0300 1231110

A free and confidential helpline for people concerned about their own or someone else’s drinking. Available: Monday- Friday 9am-8pm or Saturday to Sunday 11am-4pm.

**York Drug and Alcohol Service:** 01904 464680

3 Blossom Street
York
YO24 1AU
Email: york@changing-lives.org.uk

Integrated community drug and alcohol treatment and support, including needle exchange for York.

**North Yorkshire Horizons:** 01723 330730
Website: http://www.nyhorizons.org.uk/

Operates from five main Hubs across the county:
Harrogate - 7 North park Road, HG1 5PD
Northallerton - 5 The Applegarth, DL7 8LZ
Selby - 74-76 Gowthorpe, YO8 4ET
Scarborough - 50-60 Castle Road, YO11 1XE
Skipton - Mill Bridge House, 4A Mill Bridge, BD23 1NJ

Integrated community drug and alcohol treatment and support for North Yorkshire.
Listening in order to improve ● Always doing what we can to be helpful

**East Riding partnership:** 01482 336675

7 Baker Street, Hull, HU2 8HP

Integrated community drug and alcohol treatment and support for East Riding.

**Changing Lives (Oaktrees):** 01904 621776
Website: www.changing-lives.org.uk

Bowes Morrell House
111, Walmgate, York, YO1 9UA

A non-residential, abstinence based structured day programme for York.

**Alcoholics Anonymous:** 0800 9177650
Website: www.alcoholics-anonymous.org.uk

Regular meetings take place every week in York and throughout North Yorkshire and there is a meeting in York Hospital every Sunday, 11am-12.15pm.

**Al-Anon Family Groups:** 020 74030888 (10am-10pm)
Website: www.al-anonuk.org.uk

National help and support for families and friends.

**Frank:** 0300 1236600
A free and confidential 24 hour helpline about drugs
Narcotics Anonymous: 0300 9991212
Website: http://ukna.org/

Regular meetings take place in York and throughout North Yorkshire.

York Carers Centre
Website: http://www.yorkcarerscentre.co.uk/

Substance Misuse Support Group: 01904 715490

Information, advice and support for carers affected by alcohol and substance misuse. Regular monthly meetings held on the third Wednesday of the month, 1.30 to 3.30pm in the Tesco community room, Tesco, Askham Bar, York, YO24 1LW.

For more information please contact:

The Substance Misuse Liaison Service: York Hospital
Tel: 01904 726559
Email: substancemisuseliasionservice@york.nhs.uk

A&E Alcohol Link Workers: Scarborough Hospital
Tel: 01723 330780
Mobile: 07730 598 879
Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Substance Misuse Liaison Service, The York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 726559 or email substancemisuseliaisonservice@york.nhs.uk.

Teaching, Training and Research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.
Providing care together in York, Scarborough, Bridlington, Malton, Selby and Easingwold communities

Please telephone or email if you require this information in a different language or format

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Jeżeli niniejsze informacje potrzebne są w innym języku lub formacie, należy zadzwonić lub wysłać wiadomość e-mail
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01904 725566
email: access@york.nhs.uk

Braille
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Electronic

Owner
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