



Treatment of Elderly with Epilepsy

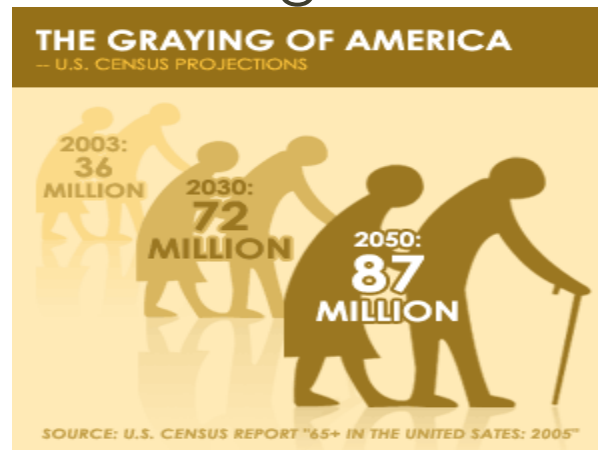
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Objectives

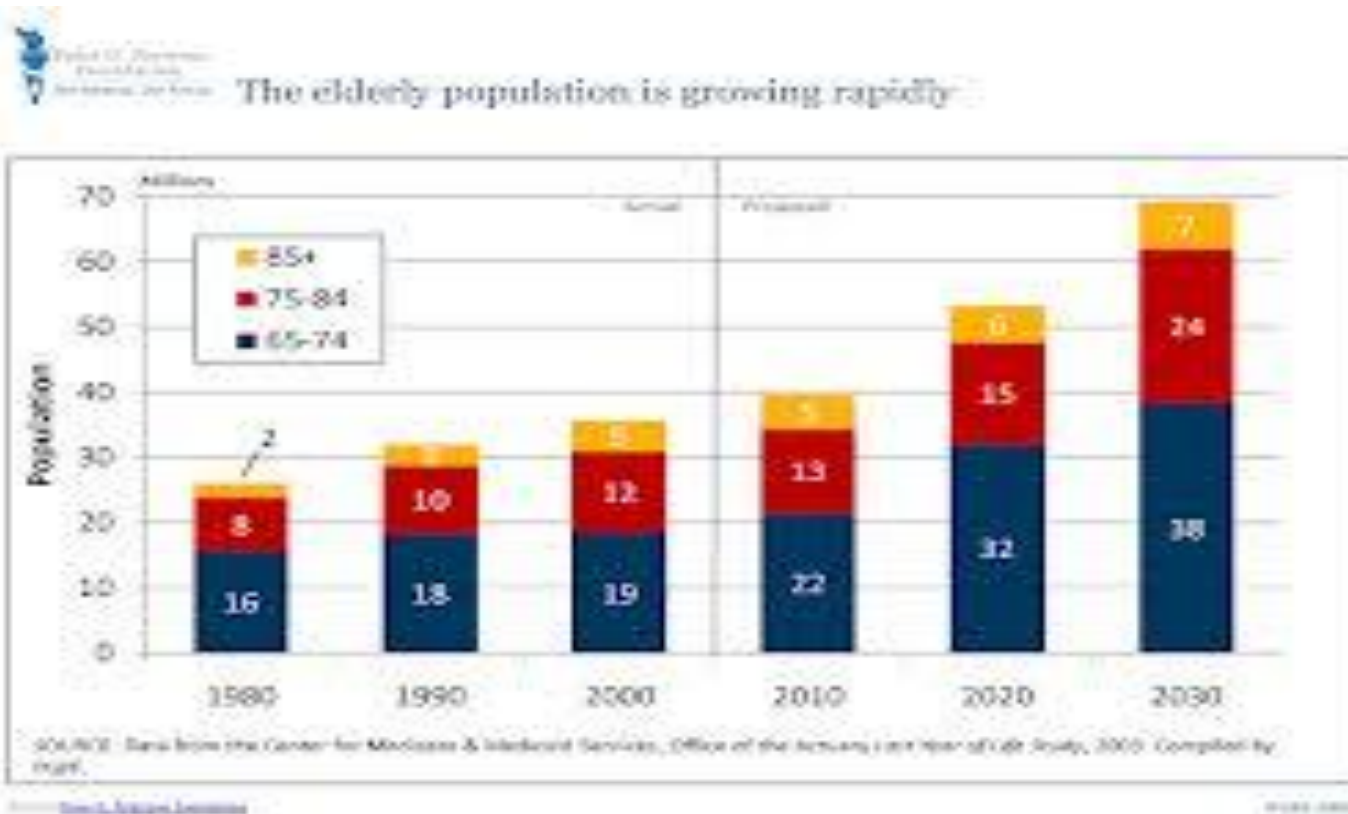
- Know the epidemiology of seizures in the elderly
- Distinguish between seizures and other medical conditions that may mimic seizures
- Recognize risk factors for seizures in the elderly
- Develop appropriate medication treatment plan
- Understand the impact and complications of epilepsy in old age

Introduction

- Baby boomers – born between 1946 and 1964 – are reaching retirement age
- Senior population growing at 1.5 times the rate of overall population
- Number of seniors age 85 and older also growing



Growth of Elderly Population



Incidence of Epilepsy

- In seniors age 65-69: 90/100,000
- In seniors over age 80: 150/100,000



Provoked Seizures

- Secondary to acute stroke, systemic disorder, medications



Unprovoked Seizures

- Epilepsy is an expression or result of a CV or neurodegenerative disease with 1/3 having an unclear etiology
- Alcohol withdrawal seizures should not be overlooked in this patient population

Presentation of seizures

- Underdiagnosed or misdiagnosed as often extratemporal and atypical features
- Differential diagnoses include psychogenic, migraine, sleep disorders, syncope, TGA, TIA, cardiac arrhythmias

Treatment # 1

- Consider prophylactic treatment after first unprovoked event in elderly person at high risk for recurrence (abnormal EEG or brain lesion)

Treatment #2

- Consider comorbid disorders and other medications elderly person already taking



Psychosocial impact

- Injuries
- Comorbidities
- Compliance
- Stigma
- Social withdrawal

