**Epilepsy and aging**

**Summary**

- Epilepsy is a common condition of the brain in which a person experiences recurrent unprovoked seizures.
- Epilepsy most commonly begins in childhood or in older adulthood, although it can begin at any age.
- People over 65 years of age have the highest incidence of epilepsy of any age, accounting for almost a quarter of cases of new onset epilepsy.
- Due to our aging population, there is an increasing number of older adults with epilepsy.

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Due to our aging population, there is an increasing number of older adults with epilepsy, and therefore an increasing need to understand the effects of epilepsy on this group.

The incidence of any type of seizure increases substantially over the age of 60, commonly due to other neurological conditions such as dementia or stroke.

**Causes of epilepsy in older people**

There are many possible causes of epilepsy and seizures in older people, including:

- **stroke** – this is one of the greatest contributors to an epilepsy diagnosis in later years. Epilepsy can arise due to damage caused to brain tissue as a result of the stroke. This may disrupt the normal functioning of the brain, resulting in seizures

- **acquired brain injury (ABI)** – similar to a stroke, the damage to brain tissue, or the scar tissue following an ABI may predispose someone to developing epilepsy. ‘ABI’ refers to injury to the brain following a range of events including: stroke, lack of oxygen to the brain and degenerative neurological conditions. A brain injury that arises following an accident or a blow to the head is termed a ‘traumatic brain injury’ (TBI)

- **tumours** – tumours in the brain can disrupt normal electrical and chemical functions, resulting in seizures

- **degenerative conditions** – this typically refers to dementia conditions, such as Alzheimer’s disease, which affect brain tissue and functioning

- other medical conditions affecting brain function.

Approximately half of all seizures in older adults have no known causes.

Other general risk factors associated with the development of epilepsy include lifestyle factors such as alcohol, smoking, and sleep deprivation, and mental health issues such as stress and depression. However, it is also possible for someone to have a number of these risk factors and not go on to develop epilepsy.

If someone is experiencing seizures, it is very important that their cause is properly investigated, as this will help determine the management and support that they need.

**Diagnosis of epilepsy in older people**

It can be hard to diagnose epilepsy in people in their later years. Epileptic seizures in older people are often mistakenly assumed to be related to another condition (such as dementia), or the ageing process.

Everyone’s experience of a seizure will be different. Some people experience seizures every day, while others only
have seizures very rarely or when they forget to take their medication. People are sometimes not aware that they are having a seizure. For this reason, it is important that friends, family or carers of older people take notice of any behavioural changes.

If you observe behavioural changes in someone you care for, such as seizures or cognitive impairment and confusion:

- make a note of when symptoms occur – for example, do they occur while the person is in specific postures or in association with particular motor movements? How long do periods of confusion last? The ‘Is it epilepsy? Witness statement’ sheet can help you do this
- recommend that they visit their doctor.

Diagnosis of epilepsy can only be made by a specialist, but accurate, thorough observations can be very helpful in making this diagnosis.

Epilepsy in older people is diagnosed through a combination of:

- observations of friends, family and carers
- medical history
- medical tests, including
  - blood tests
  - EEG (electroencephalogram)
  - CT scan (computed tomography)
  - MRI (magnetic resonance imaging).

**Epilepsy and aged care**

People in their later years living in aged care facilities are reported to have a higher occurrence of epilepsy than the wider community.

In older people, seizure activity and any associated behavioural changes can be subtle. It is important that aged care workers and carers know what to look for, can recognise the signs of seizure activity and can document it.

The Epilepsy Foundation has developed a suite of resources for the aged care sector called ‘Epilepsy in the later years’. The suite includes resources for older people living with epilepsy as well as their families, carers and aged care workers.

**Where to get help**

- Your **GP (doctor)**
- **Epilepsy Foundation** Tel. (03) 8809 0600