

Other Conditions

Children are more likely to have epilepsy if they have certain other conditions, (autism, cerebral palsy, learning difficulties, or intellectual disabilities). This does not necessarily mean that epilepsy causes these conditions or vice versa. Rather, it is usually an underlying brain dysfunction or brain damage that causes both conditions, although it is difficult to determine if this is the case. A child who has another condition in addition to epilepsy is more likely to have seizures that are more severe and difficult to control.

It is sometimes difficult for physicians to make a definitive diagnosis in young children. This is because problems may not be apparent or may be too subtle to accurately detect and diagnose at a very young age. However, as the child grows older, a more accurate diagnosis and prognosis can be made. An early diagnosis is crucial for early intervention.

Epilepsy has very different effects on different people. While some children have well controlled seizures, others may have several obvious seizures a day in addition to being diagnosed with another medical condition such as autism or cerebral palsy. Therefore, every child's situation is unique and each child has his/her own special needs.

Autism

Autism is a neurological disorder involving difficulties relating to and communicating with other persons. Approximately 30% of children with autism also have epilepsy. Children with autism often have abnormal EEGs, as do children with epilepsy, which may add to the difficulty of diagnosing each of these conditions in the same child. Other more detailed tests will often be needed to determine whether the child with autism is also exhibiting abnormal brain wave activity due to epilepsy.

Autism Society Ontario

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Cerebral Palsy

Cerebral palsy describes a group of disorders which affect body movement and muscle coordination. The condition is caused by brain damage experienced before, during or shortly after birth. Depending on the region of the brain affected, the condition may cause stiffening of the body and limbs, involuntary movement, difficulty with fine and gross motor skills, and difficulty with perception and sensation. Approximately 33% of children with cerebral palsy also have epilepsy.

Ontario Federation for Cerebral Palsy

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Down Syndrome

Down syndrome, a disorder caused by a chromosomal abnormality, is usually caused by the presence of an extra chromosome 21 in each cell. The characteristics of a child with Down syndrome may include a smaller than normal and abnormally shaped head, flattened nose, protruding tongue, upward slanting eyes, short and broad hands, a shorter than average height and intellectual disabilities.

Down Syndrome Association of Ontario

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Fragile X Syndrome

Fragile X syndrome is a genetic disorder that is passed down from the mother's side of the family. Boys are more often affected, although both genders may be. Physical characteristics of those with Fragile X syndrome include a long, narrow face, prominent ears, jaw, chin and forehead, macro-orchidism (enlarged testicles), hyper-extended finger joints, double jointed thumbs and an excessive growth rate into the early childhood years. 15 to 20% of people affected with Fragile X syndrome experience seizures. The individual may experience an intellectual disability, autistic-like behaviours, strabismus (cross-eyed), enlarged head, slanted eyes, poor muscle tone and coordination, as well as many other characteristics.

Fragile X Research Foundation of Canada

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Intellectual Disabilities

When a child is diagnosed with an intellectual disability, it can have major implications for both the child and the family. The label itself can be associated with many negative consequences. It is important for people to realize that with special assistance programs, children with intellectual disabilities can be productive members of the community. It should be emphasized that epilepsy doesn't cause intellectual disabilities or vice versa; rather, both may be the result of a brain disorder.

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Learning Disabilities

Children with epilepsy have the same range of intelligence as those without the condition. However, of those children with learning problems, up to 50% will also have epilepsy. That is, children with learning disabilities have a higher incidence of epilepsy. A child is most likely to have a severe learning disability if s/he has severe, uncontrolled seizures, in addition to a physical and/or intellectual disability. In some cases, the same brain damage responsible for the seizures, may also be responsible for causing specific learning difficulties. Generalized seizures (absence or tonic-clonic seizures) are more often associated with cognitive problems than are partial seizures (simple partial or complex partial seizures). Partial seizures tend to have more specific effects, particularly on memory and language functioning. Many learning difficulties can be overcome, using special education services, and close observation and monitoring of the child's educational progress.

Learning Disabilities Association of Ontario (LDAO)

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Lennox-Gastaut Syndrome

Lennox-Gastaut syndrome is an extremely destructive disorder which still baffles many physicians. It affects between 3-10% of children with epilepsy, more commonly males. The peak age for onset is between 3 to 5 years of age with extreme incidence occurring in the first and tenth years of life. There is commonly a history of epilepsy in the family of the affected individual, though there is no known case of familial Lennox-Gastaut syndrome. The most characteristic manifestation of the Lennox-Gastaut syndrome is a large variety of seizures.

Approximately 5% of Lennox-Gastaut syndrome patients die from inherent problems and complications within 10 years of its onset. The disorder often persists into adulthood causing a multi-faceted array of emotional problems in up to 25% of patients. Almost all patients continue to have disabilities, including learning arrest, loss of previously-developed skills, language difficulties, and impaired organization of movement.

Muscular Dystrophy

Muscular Dystrophy is the name of a group of muscle disorders which are caused genetically. These disorders are characterized by progressive weakening and wasting of the voluntary muscles that control body movement. As the muscle wastes away, they are replaced by fatty and connective tissues. Clinical symptoms of muscular dystrophy usually appear in childhood between 2 to 5 years, although some types of muscular dystrophy do not appear until later in life. The disease progresses at different rates, depending on the individual. It progresses steadily, without remission, in all children. A wheelchair usually is necessary by late childhood or early adolescence, and breathing becomes difficult as the disease reaches later stages. The disease shortens one's life span.

Muscular Dystrophy Association of Canada

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Rett Syndrome

Rett Syndrome is a severe neurological disorder which affects females within the first 2 years of life. After approximately 2 years of apparently normal development, the child suffers from the loss of speech and the ability to walk normally, and begins to exhibit autistic-like behaviours (repetitive hand movements such as clapping, body rocking). Approximately 80% of children who have Rett Syndrome also have epilepsy. There is no cure for the disease.

Ontario Rett Syndrome Association

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Tuberous Sclerosis

Tuberous Sclerosis is a genetic disorder that causes benign tumours to form in a variety of organs including the brain, eyes, heart, kidney, skin and lungs. Up to 80% of individuals with Tuberous Sclerosis will experience seizures at some point in their life. Tuberous Sclerosis is the largest known genetic cause of epilepsy. Seizures are caused by tubers or lesions in the brain. These lesions are small patches of the brain that don't develop normally. Tuberous Sclerosis can also cause autism, behavioural problems, and destruction of the kidneys, lungs, heart or other organs.

Tuberous Sclerosis Canada Sclérose Tubéreuse (TSCST)
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