

# First Tonic-Clonic Seizure

## Patient Information

Emergency Department

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## Information from the Emergency Department following a suspected first tonic-clonic (previously called: grand-mal) seizure

If you have had one suspected tonic-clonic seizure, you may never have another. However, it's natural to worry that this might happen. This leaflet is to show your family, or carers, what to do, if you do have another tonic-clonic seizure. It also looks at other issues such as safety, the driving laws, and work.

### What happens in a tonic-clonic seizure?

You go stiff, lose consciousness and, if you are standing, fall to the ground. You have jerking movements and because your breathing pattern has changed, you might get a blue tinge around your mouth. You might lose control of your bladder or bowels or both. After a minute or two, the jerking stops and you will slowly return to consciousness.

### First aid for tonic-clonic seizures

Remember ACTION for tonic-clonic seizures.

#### **A**

Assess the situation – are they in danger of injuring themselves? Remove any nearby objects that could cause injury.

#### **C**

Cushion their head (with a jumper, for example) to protect them from head injury.

#### **T**

Time - check the time – if the seizure lasts longer than five minutes you should call an ambulance.

#### **I**

Identity - look for a medical bracelet or ID card – it may give you information about the person's seizures and what to do.

#### **O**

Over - once the seizure is over, put them on their side (in the recovery position). Stay with them and reassure them as they come round.

#### **N**

Never restrain the person, never put something in their mouth and never try to give them food or drink.

#### **Call an ambulance if:**

- You know it is the person's first seizure, or
- The seizure lasts for more than five minutes, or

- One seizure follows another without the person gaining consciousness between seizures, or
- The person is injured, or
- You believe the person needs urgent medical attention.

**Some people need to rest for a few minutes after a seizure. Others may need to sleep for some time.**

## Driving – The Law

If you hold a driving licence, it is your legal responsibility to inform your driving agency of any medical condition that could affect your driving. This includes any episodes of loss of consciousness or altered level of consciousness. If you live in England, Scotland or Wales, this is the Driver and Vehicle Licensing Agency (DVLA). If you live in Northern Ireland, it is the Driver and Vehicle Agency (DVA). You should not drive until your driving agency says you can.

## Safety

Because there is some risk that you could have another seizure, it makes sense to think about safety. This doesn't mean you will have to stop doing all the things you usually do. But it may mean putting things in place to keep risks to a minimum. Here are some examples. If you are having a bath or shower, consider having someone with you or just outside the door, checking that you are safe. If you have free-standing heaters, try to place them where they are least likely to be knocked over during a seizure. Try to avoid placing your bed against a wall or next to a radiator. This can prevent you knocking your limbs on the wall, or burning yourself on the radiator during a tonic-clonic seizure.

## Seizure triggers

There are some things, called triggers, which make seizures more likely for some people. However, not everyone has a trigger for their seizures. Common triggers are stress, lack of sleep or drinking large amounts of alcohol.

## Work

Depending on the type of work you do, you may need to take some precautions for a while. Talk to your manager, to make sure.

## Epilepsy Helpline

Freephone: 0808 800 5050

Text: 0753 741 0044

Email: [helpline@epilepsy.org.uk](mailto:helpline@epilepsy.org.uk)

Tweet @epilepsyadvice

[www.epilepsy.org.uk](http://www.epilepsy.org.uk)

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## Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends and carers.

## Contact Us

Tel: 01942 822376 (Monday to Friday 9am to 4pm)

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## Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?



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## How We Use Your Information

For details on how we collect, use and store the information we hold about you, please take a look at our “how we use your information” leaflet which can be found on the Trust website: <https://www.wwl.nhs.uk>

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This leaflet is also available in audio, large print, Braille and other languages upon request. For more information please ask in the department/ward.

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**Call 111 first when it's less urgent than 999.**



Phone: 0808 802 1212  
Text: 81212  
[www.veteransgateway.org.uk](http://www.veteransgateway.org.uk)

