



Status epilepticus (SE) is a **medical emergency** that is associated with significant morbidity and mortality.

TYPES OF STATUS EPILEPTICUS

CONVULSIVE STATUS	NON-CONVULSIVE STATUS	FOCAL STATUS	ABSENCE STATUS
≥ 5 minutes of continuous convulsive seizure OR ≥ 2 discrete seizures between which there is incomplete recovery of consciousness.	≥ 10 minutes of continuous seizure OR ≥ 30 total minutes of ictal EEG activity in any given hour. These patients are at risk for convulsive status.	Focal epileptic seizure that lasts ≥ 30 minutes OR repeated focal epileptic seizures (≥ 30 minutes) with incomplete recovery between seizures.	Prolonged, generalized absence seizure that usually last for hours to days . Cardinal symptom is altered level of consciousness .
Convulsive status is the <u>most common</u> type of status epilepticus (SE). > 50% of SE episodes occur in children with no prior seizure history .			

COMMON ETIOLOGIES OF STATUS EPILEPTICUS

ACUTE SYMPTOMATIC (17-52%)	REMOTE (16-39%)	OTHER
<ul style="list-style-type: none"> CNS infection Metabolic (hypoglycemia, hyperglycemia, hyponatremia, hypocalcemia) Stroke 	<ul style="list-style-type: none"> Hemorrhage Non-compliance with AEDs Overdose Toxins Progressive neurodegenerative disorders Cerebral migrational disorders 	<ul style="list-style-type: none"> Perinatal hypoxic-ischemic encephalopathy Cerebral dysgenesis Idiopathic (5-19%) Trauma Prolonged febrile convulsions (23-30%) Sleep deprivation

HISTORY

- Seizure history:** pre-ictal, ictal, and post-ictal phases.
- Past medical history:** previous seizures or history of epilepsy.
- Illness symptoms:** fever, nausea, vomiting, or diarrhea.
- Trauma or injury**
- Medications (AED)**
- Toxins**

PHYSICAL EXAM

- ABCs, vitals, level of consciousness, GCS**
- Rule out CNS infections**
- General physical exam:** source of infection (eg: otitis media, upper respiratory tract, lungs, GI tract, or urinary tract).
- Neurological exam**
- Toxidrome indications**

INVESTIGATIONS

- Glucose
- CBC with differential
- Electrolytes
- Ca²⁺, Mg²⁺, P
- Liver function tests
- Toxicology screen
- Anticonvulsant level
- EEG
- Head CT or MRI
- Urine, blood, CSF cultures

MANAGEMENT OF STATUS EPILEPTICUS IN HOSPITAL

