

Other symptoms like a hot feeling, tight chest, heart racing, nausea, sweating, flushing, shaking can all occur. All of these symptoms indicate that your nervous system is going in to a state of red alert.

In many patients the attack can be understood as the brain's way of getting rid of these horrible warning symptoms.

Sometimes everything would feel a lot simpler if you could just tell people that you had epilepsy, something that most people understand and sympathises with. Its very important to know that unlike many people with epilepsy you **have the potential to get better without medication** even after having the symptoms for a long time.

A good way of thinking about your symptoms is:

“You didn't bring the attacks on but you can help yourself to get better”

What can I do to help myself get better?

These are some of the things that may help

- **Feeling confident about the diagnosis.** If you have ongoing doubts that the diagnosis of dissociative attacks is wrong then it is unlikely that you will get better. Getting better requires dealing with unpredictable symptoms which is hard to do if you are still worried that its epilepsy or another condition.
- **Learning to prevent attacks—** If, like most people with dissociative attacks, you find the attacks come on randomly then there are some things worth trying to avert the attack

1. Try to make the warning phase last longer. During the warning phase are you feeling frightened or worried about what is happening to your body? Remind yourself that you do not have epilepsy, you have dissociative attacks. Although you feel horrible and just want the feeling to be over, nothing serious is going to happen to you.

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If you don't experience warning symptoms then work on trying to remember them after the attack

“Dissociative Attacks can be overcome if you learn to understand them and how to avert them”

2. Use distraction techniques— If you are experiencing the warning symptoms try to distract yourself with something completely different: talk to someone, play a video game on your phone, do a puzzle or try to do some mental arithmetic. If you can distract your brain from the horrible feelings you may learn to get control of the situation again

3. Other people should stay calm—family or friends can be understandably frightened by these attacks. Try to reassure them that you are not going to die during one and you simply need to be placed in a comfortable position until the attack is over.

4. Dealing with situational dissociative attacks -If there is something which seems to bringing on attacks, like certain situations (or sometimes even certain memories) then try to recognise this and talk about it. Sometimes attacks are more likely to happen when you're worried about having one. Distraction techniques may be helpful here.

5. Expecting 'relapses' and giving yourself time to get better— it is not easy to overcome dissociative attacks. You may find that just when you thought you had the problem solved, another attack come unexpectedly.

If you have had attacks for a long time you cannot get better quickly from them, but you may be able to get better slowly.

There is more detailed guidance on treatment along with patient stories at:

www.neurosymbols.org

You may also find the NEAD trust a useful source of information. www.neadtrust.co.uk

What are Dissociative (Non-Epileptic) Attacks?



Patient Information Leaflet

www.neurosymbols.org

Dissociative (Non-Epileptic) Attacks

This leaflet aims to explain a bit about non-epileptic attacks and how you might try to overcome them.

Not all of it may apply to you and you should discuss it with your doctor



Patients with dissociative attacks often end up not feeling believed by doctors

What are dissociative attacks?

Dissociative (non-epileptic) attacks are disabling and frightening attacks that look very similar to epilepsy. They can be called Non-epileptic attacks or Non-epileptic seizures.

Unlike epilepsy, dissociative attacks are not due to abnormal electrical discharges in the brain or another nervous system disease. **They are basically your brain going in to a 'trance like' state for a period of time.** People can experience shaking attacks or attacks when they simply become unresponsive often for quite a long time

Dissociative attacks are common. Nearly half of all people brought in to hospital with suspected serious epilepsy have them. Many patients with dissociative attacks are misdiagnosed with epilepsy and may have taken drugs for epilepsy

Why are my tests normal?

In dissociative attacks all the parts of the nervous system are there, they are just not working properly at certain times. Your doctor will make this diagnosis after listening to what you feel like before and after an attack and talking to other people that were there. There are particular things that happen in dissociative attacks that don't happen in epilepsy—generally a neurologist is needed to sort these things out.

Patients with dissociative attacks have normal brain scans and other investigations such as an EEG or 'brain wave' test. If you were a computer, it's a bit like having a software problem rather than a hardware problem.

What about my other symptoms?

These are some of the other symptoms that patients with dissociative attacks can also sometimes experience as part of their illness. Often these symptoms are also caused by a dysfunction of the nervous system as part of one illness.

- Numbness or tingling
- Fatigue
- Arm or Leg pain
- Back or Neck pain
- Headache
- Poor concentration
- Sleep disturbance
- Word finding difficulty
- Slurred speech
- Intermittent blurred vision
- A floaty, distant feeling that things around you aren't quite real (derealisation)
- Weakness or Paralysis of a limb
- Frustration, Anger
- Low mood
- Lack of enjoyment
- Worry
- Panic
- Bladder and Bowel

Am I just imagining it then?

One of the big problems patients with dissociative attacks experience is a feeling that they are not being believed. This is partly because many doctors and nurses are not trained well in physical symptoms that are not due to disease and research in these areas is very poor. Some doctors really don't believe patients with these symptoms. Others do believe them but find it hard to know how to help.

So if it's a real condition but it's not a disease, what is it? Are you just imagining it? The answer is you are not imagining or making up your symptoms and you are not 'going crazy'. You have dissociative attacks.

Why do they happen?

Dissociative attacks are a complex phenomenon. They arise for different reasons in different people. Often the symptoms are accompanied by feelings of frustration, worry and low mood but these are not the *cause* of the problem.



Dissociative attacks are common but often misdiagnosed

There are a number of different situations in which dissociative attacks can arise. Your symptom may fall in to one of these categories although often none are relevant:

1. **Randomly** — One of the most confusing things about these attacks is that they usually happen out of the blue without warning for no apparent reason.
2. **At rest not doing very much**— many patients are especially liable to attacks when resting quietly. They may be less likely to have them when busy doing something
3. **In crowded places**—sometimes the experience of lots of noise or people seems to bring on attacks.

Why do they happen?

Many patients with dissociative attacks have brief warning symptoms but sometimes they are forgotten as part of the attack. It's really helpful to look for these as recognising them can help with treatment:

Dissociative symptoms (depersonalisation / derealisation)—

These words describe symptoms that many people have at the same time as their attacks. This is usually a frightening feeling that things around you are not quite real, or that you don't quite feel connected to your body or a feeling that everything is far away and weird. If you have these symptoms it is helpful to know what they are and that they are part of the attack. Many people who have never experienced these symptoms before are so frightened by them that they think they might be dying. You can get an 'outer body experience' with these attacks but you cannot die from them. Often people describe being aware of people around them but being unable to communicate with them. *Continued.*