

The Clinical Approach to Seizures

micro drip study guide

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The slide features a dark background with white circuit-like patterns on the left and right sides. In the top right corner, there is a small video inset of a man in a patterned shirt speaking, with the 'drip.vet' logo above him. The main title 'GRAND MAL SEIZURE' is in large white letters. Below the title are two rounded rectangular callout boxes: a purple one containing the text 'Classic Appearance' and a pink one containing 'Tonic-Clonic Seizure'.


And so the most common seizure we will see is a grand mal seizure. This is kind of our classic appearance of a seizure, it's also known as a tonic clonic seizure. And the tonic clonic seizure aspect of it refers to the two main components of the seizure.

The slide has a dark background with white circuit-like patterns. On the left, the text '(GIN) AND TONIC PHASE' is written in white. Below this text is a video inset of the same man from the first slide, with the 'drip.vet' logo above him. To the right of the video is a white rounded rectangle containing five horizontal bars with text: 'Generally Unconscious' (purple), 'Lateral' (purple), 'Salivating' (purple), 'Urinate/Defecates' (pink), and 'Breathing is irregular or absent (cyanosis)' (pink).

First, the tonic phase. And these patients are typically unconscious. They will be lateral, most of them will salivate. They typically will urinate or defecate. And their breathing is irregular or absent.

You may end up seeing an absent breathing in these patients, simply because of the intense muscle contraction of the body. This can cause cyanosis and in some patients can cause a mimicking aspect of syncope episodes, so it's important to try to differentiate between the two.


CLONIC PHASE



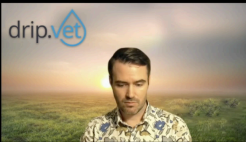

- Paddling
- Rhythmic jerking
- Chewing movements
- Vocalization

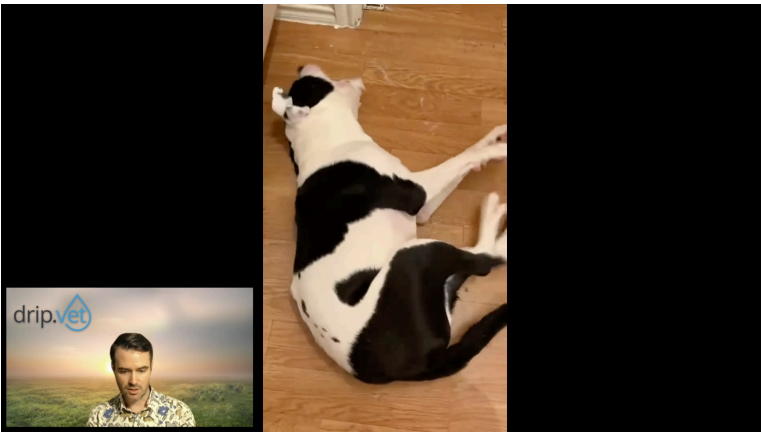
After we have our tonic phase in these patients, they tend to go into the chronic phase. This is where we see that paddling, that chewing movement. Some of these patients will vocalize. But this rhythmic jerking is usually very apparent here.

WE ALL KNOW WHAT A SEIZURE LOOKS LIKE...



- <https://www.youtube.com/watch?v=HzSj1JT9Zfq>





And so we all typically like to think we know what a seizure truly looks like. And so I've got a quick video here that I'm going to pull up for you guys.

And so you can see the patient salivating on their side. They start to go into the tonic aspect of the seizure here in just a second. You know the patient is continuing to salivate. And here's the tonic aspect of it, where they become very rigid, intense. And you'll see there's not a lot of rhythmic paddling, it's more the tenseness and the contracture of the musculature.

After that, you will see the clonic phase here shortly, where the patient will begin the rhythmic movements. You can see in the pelvic limbs now. You start to see it in the jaw here in a second. You can see the chattering and the teeth movement.



...OR DO WE?

- Atonic Seizure**
 - Sudden and brief loss of muscle tone.
- Myoclonic Seizures**
 - Shock-like movement
- Absence Seizures (Petite Mal)**
 - Uncommon – Brief loss of consciousness
 - Unresponsive, facial twitching, and mild limb jerking

So whenever, we see these seizure events, we always say, OK, these are typically grand mal seizures. But there are a number of other different types of seizures as well.