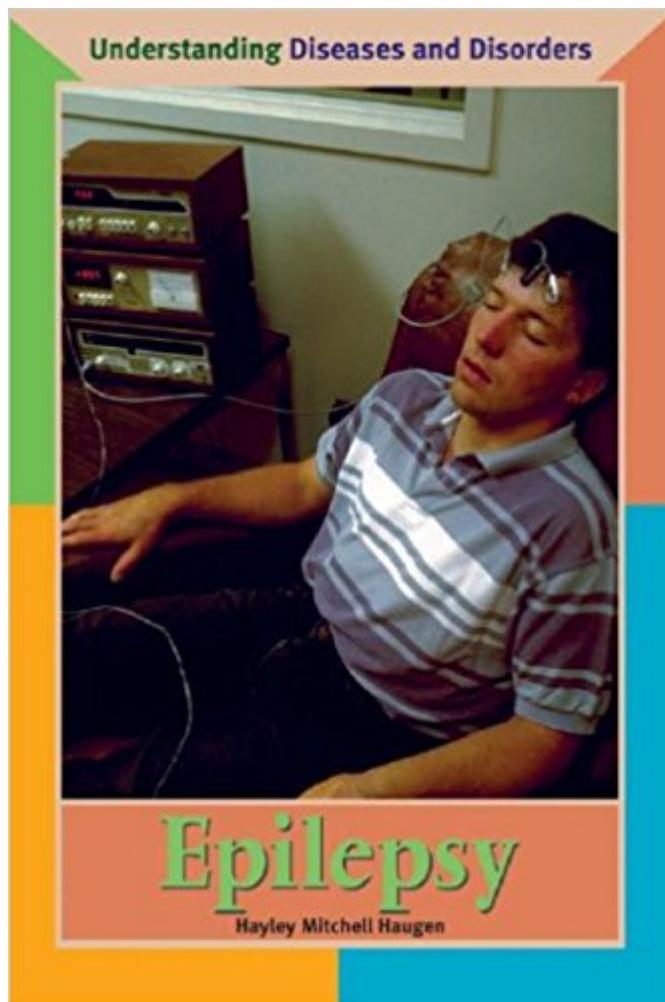


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# Epilepsy (Understanding Diseases And Disorders)



## **Synopsis**

Book by Haugen, Hayley Mitchell

## **Book Information**

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## **Customer Reviews**

Book by Haugen, Hayley Mitchell

If you want Unreliable information about seizures and epilepsy, this is YOUR book. It is packed with statements that keep my jaw in perpetual drop mode. My now 29 year old daughter has had seizures since the age of seven so I am relatively well informed about the basics of epilepsy. For starters, one doesn't properly refer to the person with epilepsy as "the epileptic". This term is about as outmoded as the Ford Pinto, is an insult to the humanity of the person with this disability, and marks the author as someone who has no idea of what she writes. I received this book from our local library and have marked it up with a big thick Sharpie. I will be taking it back to the library and will tell them I wish to purchase the book because I've marked in it. That will at least take it off the shelf of our local library. If there are other copies at other branches in our city, I will do the same until every one of these books is gone. NO parent needing info about seizures should have this book as any kind of serious source of information. Included incorrect statements: 1. You put a soft cloth in mouth of person having seizure. This is wrong, wrong, wrong. No reputable source says this anymore. Granted, a couple generations ago, that was suggested. Present thinking is that all this

does is risk the person helping suffering a serious bite from the person having the seizure. (This book published in 2005 so NO excuse for having such incorrect info in a book of that fairly recent vintage.)2. Many cases of.....epilepsy are passed down from mothers and fathers to their children. While true that there are some seizures that appear to have a genetic component, this statement is a gross overgeneralization and is totally out of line. NO reputable neuro would ever say this to their patient with seizures. It is true that in most cases, the science community has only limited knowledge about the specific origins of a particular type of seizure. To suggest that many are inherited (with no further info) is irresponsible.3. Author states that "partial seizures affect only one part of the body at a time, for example a seizure will affect only vision." This is simply wrong. Complex partial seizures (as opposed to simple partial seizures, a distinction the author doesn't even address) often involve more than one "body part". For example, there may be fidgeting hand movement AND vision disturbances AND auditory disturbances all with the same complex partial seizure. This info is readily available in very simple articles about seizures. How the author could miss that, I remain perplexed.4. Author refers to petit mal seizures as "less traumatic" when contrasted to grand mal (her word is grand mal, this is also an out of date term that the community rarely uses anymore). Since the person having the "grand mal" is by definition (something she also gets wrong, stating that they are "often unconscious" when by very definition (indeed even her own definition in back of book, see terms, ) unconscious we must assume that the "traumatic" refers to the bystanders. Well, yes, a seizure is kinda scary, but using words like traumatic just further enables people to see seizures as something to be feared (and this is really the origin of so much of the taboo of seizures and reinforces the jokes, etc. that people make about seizures).5. Page 12, "Each person can learn what activities cause him or her to have seizures. THIS IS SO WRONG I am left furious. NO, for most people with seizures, they will never know what causes them to have seizures. True, there are triggers, and the author references some triggers. But, the majority of people with seizures cannot find " the activities that cause the seizures." The implication here, in such a broad statement is that people who continue to have seizures just haven't found their triggers, if they'd just get with it and find and avoid those triggers...voila seizure free. It just doesn't work that way for most people. My daughter (I assume a person covered under "each person" the author references) has never found an activity that causes her seizures. This fact alone renders the author's statement incorrect.6. The author gives advice on alcohol intake, and seems to endorse 1-2 daily drinks for those not on medication. While that may be fine for some, the blanket statement gave me reason to question its wisdom.7. in referring to anticonvulsant medications, author states, "Many of these drugs are addictive..." This is so patently untrue, it is horrifying. Matter of fact,

anticonvulsant meds are sometimes used in withdrawal for addicts because they ease the withdrawal symptoms AND are themselves NOT addictive! Frankly, all one has to do is google "are AC drugs addictive" to find that the author is wrong in her characterization.<sup>8</sup> She states that most AC side effects are "short term". I think that is a mischaracterization, at best. Most people taking AC meds will tell you that they do have to cope with at least limited side effects from the meds they take to control seizures.<sup>9</sup> This is another jaw dropping statement: "No matter what therapy people with epilepsy choose, they will still experience seizures from time to time." That is so wrong, it's hardly worth dissecting. Many people who have had seizures find a medicine that works for them, and they have no more seizures for the remainder of their lifetime. Many people have seizures, take meds, and are able to gradually remove the meds and remain seizure free for life. While it is true that many people will have to cope with seizures and their control throughout their life times, it is ridiculously incorrect to make the sweeping statement that people with epilepsy will still have seizures from time to time. The facts show this to be completely unsupported in the literature about epilepsy.<sup>10</sup> Author says (page 37) people with "grand mal" (again, such an old term) often lose consciousness". This is wrong simply because "often" necessitates "not always", and by definition with this seizure type unconsciousness always is a component. Indeed, had the author bothered to consult her own glossary, page 42, she states "becomes unconscious" in the definition. Thank goodness, at 48 pages, index included, the author kept her bungling facts to a very short book. In reading the back cover of this book, I learn that this author holds a master's in English and creative writing and is working on her PhD in American literature. It further states, "she teaches creative writing..." Well, yes, I can see how she might...this is creative and some other terms I won't use because of their tendency to be viewed offensively! The pity is that some publisher thought it'd be a good idea to have an unqualified person write a book they could market to teens as a definitive and accurate presentation of a very serious medical condition..

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