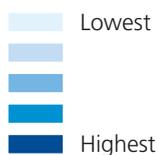


NEUROLOGICAL PROBLEMS

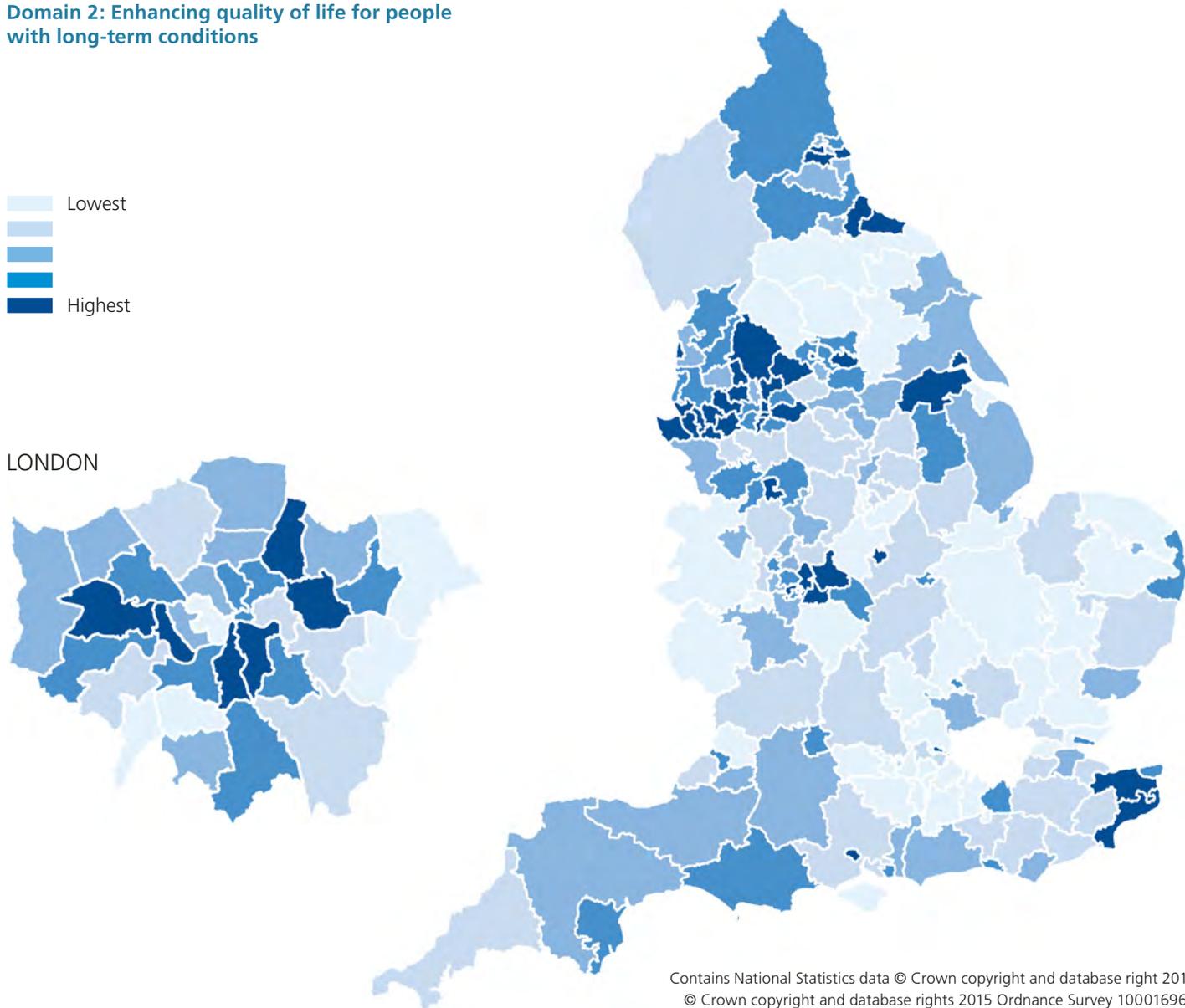
Map 14: Rate of epilepsy emergency admissions to hospital in people aged 18 years and over per population by CCG

Directly standardised rate, adjusted for age and sex, 2012/13

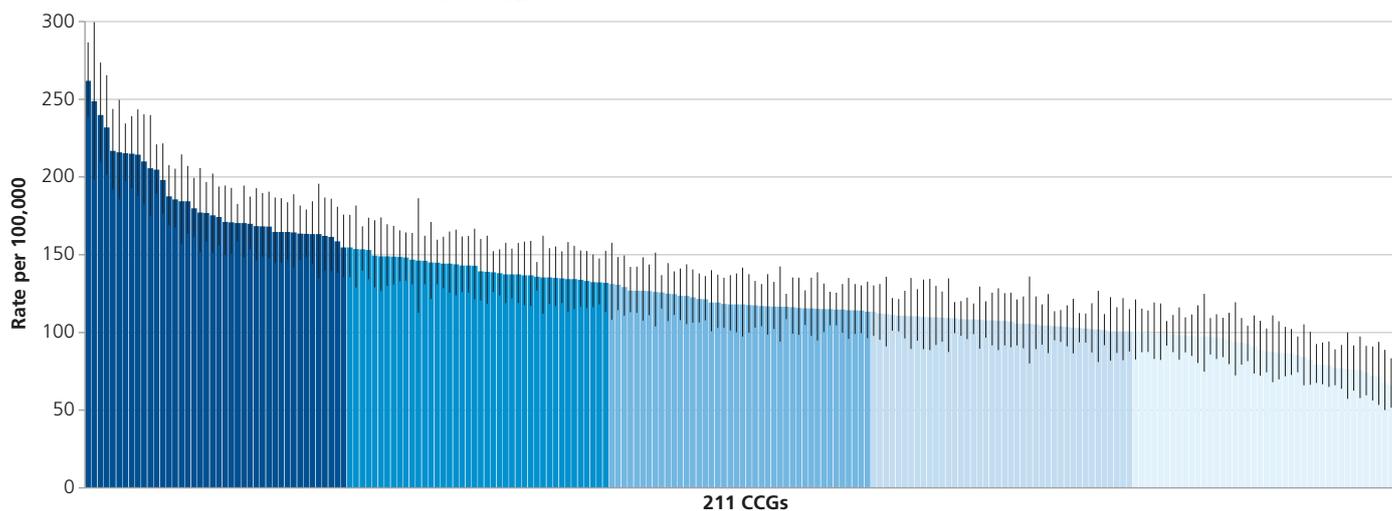
Domain 2: Enhancing quality of life for people with long-term conditions



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Context

Epilepsy is an illness that causes recurrent seizures. It can affect anyone, at any age, and from any walk of life. One in every 100 people in the adult population suffers from epilepsy, and about one in ten of those people will be admitted to hospital each year as a consequence. Each year, 32,000 people in the UK will be newly diagnosed with epilepsy. People with epilepsy are 2–3 times more likely to die prematurely than those in the general population. The prevalence of epilepsy varies across England: some areas record a prevalence 2.5 times higher than others. People in lower socio-economic groups are more likely to experience epilepsy; it is also associated with increasing age, vascular disease, and abuse of drugs or alcohol.

Epilepsy is an exceptionally common cause of ill health, disability, and social exclusion. People with active epilepsy are:

- are less likely to be employed;
- are unable to drive;
- may be unable to live alone.

Contrary to common belief, only one in five people with epilepsy has a learning or an intellectual disability. With good care, however, about 70% of people with epilepsy will become seizure-free, and be able to lead a normal life.

There are many different types and causes of epilepsy. It can be inherited or a consequence of brain injury; in about 50% of patients, no cause can be identified. Some people who present at emergency departments following a seizure will make a full recovery, and can be discharged home to be investigated as an outpatient. For others, it may be necessary to admit them for a short time to investigate the cause or to establish better treatment.

Magnitude of variation

Map 14: Emergency admissions

For CCGs in England, the rate of epilepsy emergency admissions to hospital in people aged 18 years and over ranged from 50 to 262 per 100,000 population (5.2-fold variation). When the seven CCGs with the highest rates and the seven CCGs with the lowest rates are excluded, the range is 76–215 per 100,000 population, and the variation is 2.8-fold.¹

Reasons for the degree of variation observed could include differences in:

- prevalence of the illness²;
- clinical management in hospital, e.g. protocols used in the emergency department;
- control of the condition, e.g. compliance with drug treatment;
- availability of local care, and care pathways;
- patients' social circumstances.

Map 15: Percentage seizure-free

For CCGs in England, the percentage of people with epilepsy aged 18 years and over on GP epilepsy registers who were seizure-free in the preceding 12 months ranged from 46.5% to 87.1% (1.9-fold variation). When the seven CCGs with the highest percentages and the seven CCGs with the lowest percentages are excluded, the range is 50.2–73.1%, and the variation is 1.5-fold.

Reasons for the degree of variation observed include differences in:

- the severity of epilepsy and the level of control of the condition, e.g. compliance with drug treatment;
- availability of local care, and care pathways;
- patients' social circumstances.

1 For data in 2006/07–2008/09 by PCT, see Atlas 1.0, Map 10, pages 42–43.

2 Public Health England. Neurology Profiles. "Epilepsy" tab, "Prevalence" is the first indicator. <http://fingertips.phe.org.uk/profile-group/mental-health/profile/neurology/data#gid/1938132710/pat/46/ati/19/page/0/nn//par/E39000030/are/E38000010/iid/90958/age/168/sex/4>

Options for action

Commissioners need to specify that local service providers:

- comply with NICE guidance CG137 and NICE quality standards QS26 and QS27 relating to epilepsy (see “Resources”);
- appoint a local epilepsy lead clinician or epilepsy champion;
- establish a local epilepsy system of care for people with epilepsy to monitor and improve care;
- develop population-based epilepsy services with effective links to epilepsy specialists, who are often hospital based;
- establish a rapid access “First Seizure clinic”, linked to the emergency department and epilepsy service, with access to appropriate diagnostic investigations, including magnetic resonance imaging (MRI), electroencephalography (EEG), and EEG telemetry;
- establish, and train, specialist nurse practitioners in epilepsy, linked to the local epilepsy service, who are able to provide advice, guidance and support in hospital and in community settings;
- identify, encourage and train GPs with a special interest in epilepsy.

Providers of emergency services need:

- to develop an emergency department protocol for people presenting with seizures, avoiding admission whenever safe and possible;
- to ensure that all people presenting to hospital with a seizure see a specialist who has expertise in epilepsy.

To help improve the control of epilepsy, general practitioners need to use their registers of people with epilepsy:

- to review and optimise people’s prescriptions once each year;
- to identify ways to increase people’s concordance with drug regimens;
- to identify, and prioritise the care of, people at high risk of seizure, admission and sudden death;
- to consider the effect of epilepsy and epilepsy medication on co-morbidities that might trigger admission, and vice versa.

RESOURCES

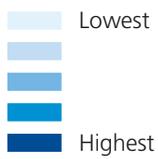
- NICE. The epilepsies: The diagnosis and management of the epilepsies in adults and children in primary and secondary care. NICE guidelines [CG137]. January 2012. <http://www.nice.org.uk/guidance/cg137>
- NICE. The epilepsies in adults. NICE quality standard [QS26]. February 2013. <http://www.nice.org.uk/guidance/qs26>
- NICE. The epilepsies in children and young people. NICE quality standard [QS27]. February 2013. <http://www.nice.org.uk/guidance/qs27>
- NICE. Diagnosis and management of the epilepsies in adults, children and young people. NICE commissioning guidelines [CMG47]. February 2013.
- Epilepsy Society (2015) Recommended information. A list of resources, particularly relevant to healthcare professionals. <http://www.epilepsysociety.org.uk/recommended-information>

NEUROLOGICAL PROBLEMS

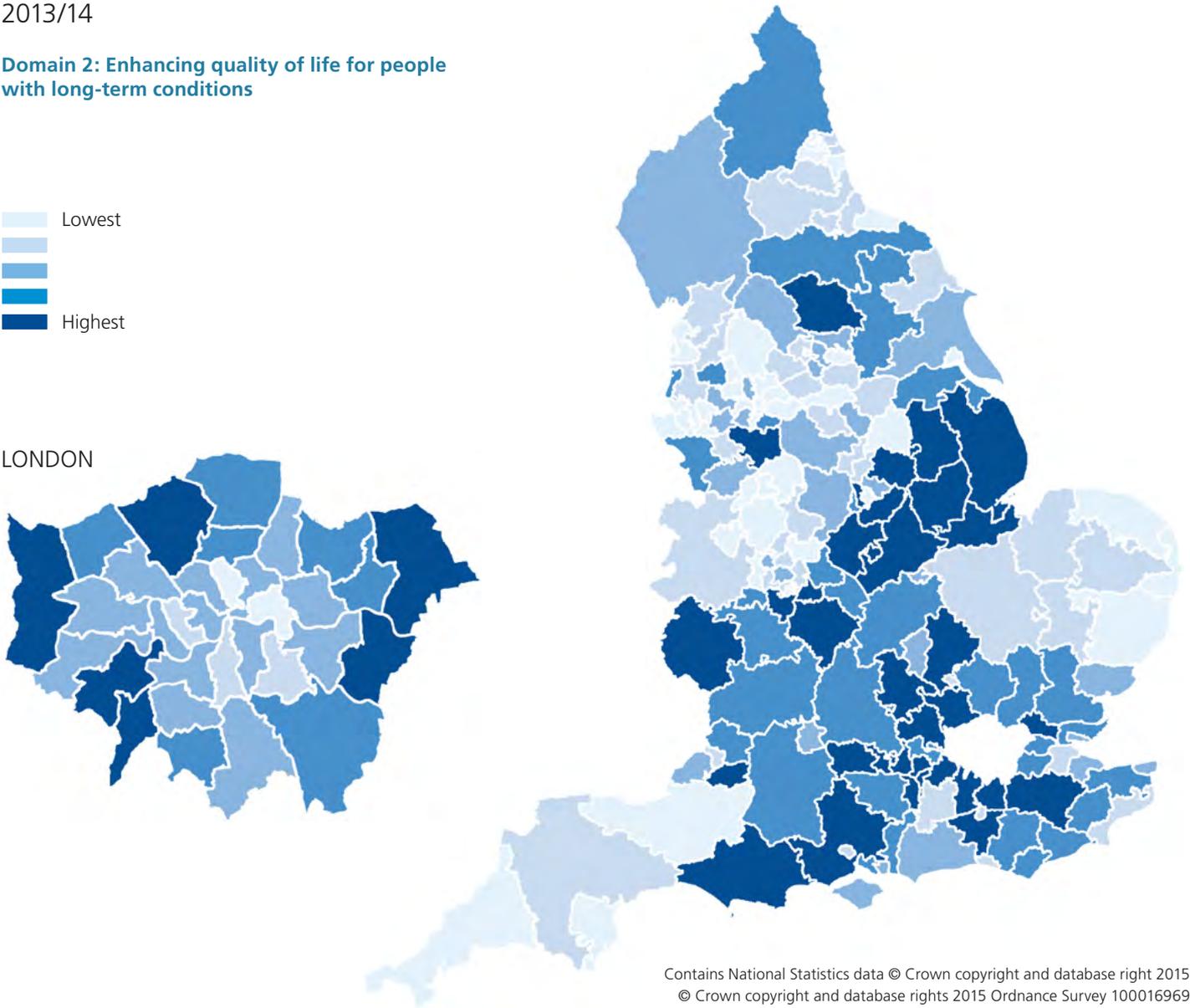
Map 15: Percentage of people with epilepsy aged 18 years and over on GP epilepsy registers who were seizure-free for the preceding 12 months by CCG

2013/14

Domain 2: Enhancing quality of life for people with long-term conditions



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