

## **Epilepsy**

Epilepsy (seizure disorder) is a neurological disorder resulting from abnormal electrical activity of the brain. Epilepsy may be acquired or idiopathic. Epilepsy is termed idiopathic if there is no evidence of an organic brain lesion. Causes of acquired epilepsy include: genetic and birth factors, infection, toxins, alcohol withdrawal, trauma, circulatory disorders, metabolic disorders, tumors and degenerative disease. A febrile seizure is an episode that occurs with a high fever. In children under age 5, febrile seizures have no medical consequence. However, a febrile seizure can be the first epileptic attack in those children who have a family history of epilepsy and experience the initial seizure after age 5.

Seizure Type	Pattern	Definition
Complex Partial Seizure	Partial/Localized	Also called psychomotor seizure or temporal lobe seizure. These are behavior seizures where involuntary movements occur along with loss of consciousness.
Tonic-Clonic Seizure	Generalized	Characterized by loss of consciousness and rhythmic, generalized involuntary contractions and relaxation of muscles.
Absence Seizure	Generalized	Episode characterized by a brief lapse of consciousness that may be so fleeting that the affected person may be unaware of the seizure.
Simple Partial (Myoclonic) Seizure	Partial/Localized	Characterized by involuntary contractions of muscles of the extremities, trunk or face without loss of consciousness.

A number of drugs are available and can control most seizures, and many epileptics must take these medications throughout their lives. All drugs, however, have some side effects. Certain drugs are preferred for the control of particular seizure types and some epileptics must take more than one medication in order to control their seizures. If someone has been seizure-free for a certain amount of time, often four years, the physician and patient may decide to discontinue medication for a trial period.

Features associated with a poorer prognosis include: seizures not well controlled with medication, poor compliance with their treatment plan, need for hospitalization or surgery and continued use of alcohol in alcohol related seizures. **Status epilepticus** is a severe form of seizures that is characterized by frequent, generalized convulsions and failure to regain consciousness between attacks which requires hospital admission. **Metabolic brain disease** is a term used when systemic disease such as kidney failure, liver failure, electrolyte abnormality or low blood sugar can cause brain dysfunction including seizures. The life risk in these seizures depends on the underlying condition.

This material is intended for insurance informational purposes only and is not personal medical advice for clients.

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Epilepsy without any other significant impairment is rated as follows:

	Epilepsy Schedule
Complex Partial (Consciousness Impaired)	А
Generalized Tonic-Clonic	Α
Generalized Absence	В
Simple Partial (Consciousness Not Impaired)	В
Metabolic Brain Disease	С
Status Epilepticus	С

Epilepsy Schedule	Underwriting Table
Schedule A - adequately investigated, well controlled, on treatment	
Within 6 months of diagnosis	Postpone
Within 2 years of last seizure	Table D
3rd - 5th year	Table B
After 5th year	
Any mental deterioration or personality changes, or more than 6 seizures per year	Decline
Schedule B	
Within 2 years of last seizure	Table B
After 2 years	Non-rated
Schedule C	Usually Decline
Febrile Seizures - under age five, not more than two isolated attacks, no family history of seizure disorder, normal development, no sequelae	Non-rated
Others, epilepsy suspected	Refer to Epilepsy Schedule A

To get an idea of how a client with Epilepsy would be viewed in the underwriting process, feel free to use the Ask "Rx" pert underwriter on the attached page for an informal quote.

## Epilepsy - Ask "Rx" -pert Underwriter (ask our experts)

Producer	Phone	Fax
Client	Age/DOB	Sex
If your client has a history of Epilepsy, please answer	er the following:	
1. Please list date of first diagnosis/type of seizure:		
2. Please note type of seizure:		
☐ Complex/Partial Seizure		
☐ Tonic-Clonic Seizure		
☐ Absense Seizure		
☐ Myoclonic Seizure		
3. Please indicate the number or frequency of episo	odes and date of last episode	:
4. Is your client on any medications?		
☐ yes, please give details		
□ no		
5. Has your client been hospitalized for treatment of	of epilepsy?	
☐ yes, please give details		
□ no		
6. Has your client smoked cigarettes in the last 12	months?	
☐ yes, please give details		
□ no		
7. Does your client have any other major health pro	blems (ex: heart disease, etc.	)?
☐ yes, please give details		
□ no		
After reading the Py for Success on Enilancy please	a fool from to use this Ask "Pr	" nort underwriter for an informal quote