## Grand Mal Seizure

#### What is Grand Mal?

Grand Mal seizure — also described as tonic-clonic seizure is characterized by loss of consciousness, falling down, frequently loss of bowel or bladder control, and convulsions. Seizures are caused by an abnormal electrical discharge in the brain.



By Donald V. Victorson, CLU

#### Symptoms

A Grand Mal seizure starts with a loss of consciousness and falling down followed by 15 to

20 seconds of muscle rigidity (the tonic phase), then several minutes of violent rhythmic convulsions (the clonic phase). During the seizure, the patient may experience decreased blood oxygen levels due to difficulty breathing.

After the seizure, which may last up to five minutes or longer, headaches, drowsiness, and confusion are common.

Grand Mal seizures may occur randomly. Occasionally they can be triggered by light, sound, or touch in people that are susceptible. Sleep deprivation and excessive use of alcohol may also trigger seizures.

#### Causes

If the electrical discharges in the brain become abnormally synchronized a convulsion or seizure can occur. This abnormal activity can remain localized, or can spread rapidly, involving the entire brain.

Often the cause of Grand Mal seizure is idiopathic (unknown), however some of the known causes include:

- Metabolic: Kidney or Liver disease can upset the chemical balance in the body, as can very low levels of sodium, calcium, or magnesium.
- Vascular: Blood vessel disorders, as where an abnormal connection exists between arteries and veins in the brain can cause seizures.
- Toxic Substances: Using Drugs or Alcohol, or withdrawing from using Drugs or Alcohol can affect the brain and trigger a seizure.
- Infection: Inflammation of the brain, as from encephalitis or meningitis can trigger a seizure.
- Birth Defects: Congenital malformations in the brain may be the cause of seizures in infants and young children.

- Brain Tumor: Although uncommon, a brain tumor has been known to trigger a seizure.
- Strokes: A common cause of seizures in older adults.
- Family history: Grand Mal is in some cases an unfortunately inherited family trait.

To properly evaluate the prospect's insurability you must ask the following important questions:

#### What type of seizure disorder does the client have?

Has the seizure disorder been diagnosed as being PETIT MAL, with seizures lasting only a few seconds (good), and no loss of consciousness, or has the seizure disorder been diagnosed as GRAND MAL (not good) with seizures lasting up to minutes, and with loss of consciousness?

### When was the client first diagnosed with a seizure disorder?

It is important to document at what age the client first experienced their first seizure.

#### When did the client have their most recent seizure?

The underwriting of seizure disorders is based upon the client's degree of clinical stability. Recurrent seizures that produce loss of consciousness or control can be extremely dangerous, especially if driving an automobile or operating machinery. Seizures can also cause injuries from falling including head injuries. How long between seizures? How severe? What medical care was required at the time of the seizure?

## When was the last time the client was hospitalized for a seizure?

Seizures serious enough to require hospitalization are extremely significant to underwriting, and are likely to be indicative of Grand Mal, a condition far more serious than Petit Mal.

#### What medications is the client currently taking?

Common medications used to treat seizures include Tegretol, Zarontin, Lamictal, Dilantin, Depakene and phenobarbital. Seizure medications are associated with birth defects, posing extra problems to women during their childbearing years. It is important to document all of the medications being taken and their dosages.

#### Is Surgery Contemplated?

Occasionally, if the seizure disorder does not respond well

to medication, or if the cause of the seizure is a tumor, or to correct a birth defect surgery may be recommended.

# Is the client employed on a full time basis, or attending school on a regular basis, and does he drive an automobile?

Clients who cannot work, or who cannot obtain a driver's license would be extremely difficult to underwrite because of their limited functional ability. Those who are employed or functioning full time however, and have a valid driver's license can expect a more favorable underwriting decision.

#### **Underwriting Prognosis**

Most people who experience Petit Mal seizures live a fairly normal life with few, if any restrictions on their activities. Unfortunately, Grand Mal seizures are far more severe, and of greater duration. Many experience complications that can include: Learning Disabilities, Injuries from falls, or from seizures occurring while driving or operating machinery, as well as the side effects of medications. There is also a higher risk of suicide with Grand Mal epilepsy.

Where the client has a well-documented history of being seizure-free for a number of years, even though continuing to take anti-seizure medication, mildly Sub-Standard to perhaps Standard is possible.

With a history of frequent attacks, where injuries occur, or if response to anti-seizure medication is poor, a high rating or declination is likely.

Recent history of seizures without a proper diagnosis will almost always require the case to postponed.

Victorson Associates specializes in underwriting Sub-Standard difficult cases.

