

## Care after presenting with seizures

More than 50,000 attendances at Emergency Departments in the United Kingdom each year are with a seizure and of these, half are admitted.

Many patients attend multiple times and yet the [National Audit of Seizure Management in Hospitals](#) (NASH) shows that many are on suboptimal therapy and that only a minority reach the specialist service that could prevent further seizures, and implement strategies to avoid hospital attendance should seizures occur.

The Cheshire/Merseyside data show that only 8% of people with first seizures meet the NICE (National Institute for Health and Care Excellence) recommendation of a specialist review in two weeks.

The **Care after Presenting with Seizures** (CAPS) project aims to find out if actively helping patients to be attend an early two week appointment will make the changes that reduce readmissions, re-attendances and improve quality of life.

The research means we will set up a dedicated nurse in each of three hospitals in Merseyside, who will identify all who attended the Emergency Departments in the previous 24 hours with a seizure (regardless of whether or not they were admitted) and offer an appointment at a seizure clinic within the next fortnight.

These clinics will either be at the same hospital as the Emergency Departments or at The Walton Centre, aiming to reduce travel needs and ensure that patients see a clinician with appropriate expertise. Nurses will facilitate travel and other arrangements to help patients attend. If patients miss an appointment, they will be followed up personally by the nurses and offered another appointment. Consent will also be sought from the patients to be contacted at a future date to complete questionnaires related to Patient Reported Outcome Measures (PROMs) and Patient Reported Experience Measures (PREMs). These will allow us to analyse the patients' views on the outcomes and appropriateness of the new scheme.

It is anticipated that by offering patients rapid access to clinics this will ensure that they receive specialist care, be offered the most appropriate drug treatment and receive advice on how to best manage their seizures. This should lead to an improvement in seizure control, which may improve quality of life and reduce the likelihood of re-attending ED. As most patients are below 50 years of age, benefits may include opportunity for work or other activity as well as feeling better.

We will compare the three test hospitals with the other hospitals in the Merseyside/Cheshire area that access neurology services from The Walton Centre, and with the rest of the North West coastal area. We will monitor attendances at Emergency Departments, access to neurology/epilepsy services and patients' outcome using questionnaires. We will also interview patients to assess their experience of services and their preferences for how services should be coordinated and delivered.

Ultimately we will identify whether the new care pathway results in patient benefit, reduced Emergency Departments use, and more efficient use of health service resources. This will be quantified with a Health Economic assessment.

If the new care pathway proves successful, it could be implemented more widely across the North West Coast and across the UK through the Academic Health Science Networks (AHSN).

For further information on this research, please contact Professor Tony Marson on [a.g.marson@liv.ac.uk](mailto:a.g.marson@liv.ac.uk) or Dr Pete Dixon on [peted@liverpool.ac.uk](mailto:peted@liverpool.ac.uk)