The World Health Organisation defines an epileptic seizure as a transient loss of function of all or part of the brain due to excessive electrical activity. Physical, sensory or other functions can be temporarily lost.

Certain types of epilepsy can be linked with learning, behavioural and speech and language difficulties. This is increasingly recognised and the risks are greater if epilepsy occurs before 2 years of age. Parkinson (1994) found that from a small study of children referred for assessment of their epilepsy, 40% had undiagnosed language impairment of varying degrees of severity.

Epilepsy can cause temporary loss of function in one or more parts of the brain. If these parts are involved with understanding, organisation and communication processes, difficulties in using language can result. These difficulties can be severe, causing general delay in language development or a disordered pattern of language abilities.

The following epilepsy syndromes have associated language difficulties:
- Landau Kleffner Syndrome
- ESES or Tassinari’s syndrome: now called CSWS (Continuous Spike Waves of Slow Sleep)
- Lennox-Gastaut syndrome
- Temporal Lobe epilepsy.

Sometimes the disability can be extremely subtle – such as a high level language impairment or disorder. Children may have pragmatic difficulties and, therefore, will not have a clear understanding of language use. They can appear socially inept and can misread others’ intentions. In these cases the child may exhibit bizarre or socially unacceptable behaviours or the child’s language may appear to be “odd” in an inconsistent way. They may have poor turn taking skills, excessive or restricted topic maintenance, and poor skills in greeting, questioning, seeking the attention of others, describing or commenting.

Some children may have episodes of slurred or dysfluent speech. These episodes can occur suddenly and be unconnected with stress or other obvious ‘trigger’ factors. They can be caused by changes in medication and/or as a result of epileptogenic activity i.e. electrical activity in the brain which does not necessarily manifest itself as an obvious epileptic attack.

References
Aicardi, J (1986), Epilepsy in Children. Philadelphia: Lippencott-Raven
Corbett, J (1985), Epilepsy as part of a handicapping condition. Ross, E & Reynolds, E (Eds) Paediatric Perspectives on Epilepsy. Chichester: John Wiley & Sons
Parkinson, G (July 1995), Complex epilepsy and language disability. Bulletin. Royal College of Speech and Language Therapists
Please note: Afasic does not hold copies of any referenced material. However, it may be obtained via academic libraries.

Other relevant Glossary Sheets
- Developmental language delay/developmental language disorder (3)
- Semantic and pragmatic disorders (5)
- Aphasia/dysphasia (17)
- Landau Kleffner Syndrome (23)

Other organisations which can help
Speech and Language Therapy Service
The David Lewis Centre for Epilepsy
Mill Lane
Warford
Nr Alderley Edge
Cheshire
SK9 7UD
Tel: 01565 640000

National Society for Epilepsy
Chesham Lane
Chalfont St Peter
Bucks
SL9 0RJ
Tel: 01494 601300

Epilepsy Action
New Anstey House
Gate Way Drive
Yeadon
Leeds
LS19 7XY
Helpline: 0800 800 5050

Written by Gill Parkinson, children’s language specialist (speech and language therapist), The David Lewis Centre for Epilepsy, Cheshire

© Afasic 2004

Afasic
1st Floor
20 Bowling Green Lane
London EC1R 0BD
Phone 020 7490 9410
Fax 020 7251 2834
Email info@afasic.org.uk
www.afasic.org.uk
Helpline 0845 3 55 55 77
Registered charity no. 1045617