



SURF LIFE SAVING AUSTRALIA POLICY STATEMENT EPILEPSY

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INTRODUCTION

Epilepsy does not preclude a person from being a surf lifesaver, however, for the safety of all concerned, Surf Life Saving Australia has developed clear guidelines for those who suffer from this condition and wish to become members.

Many people with this condition have reached world champion status in sport and several have captained national teams.

The statement does not present rigid rules but guidelines which may need to be varied in a rational way in different circumstances.

The need for the statement is highlighted by the fact that no other life saving or water safety organisation in the world had a policy on this subject at the time research was commenced.

BACKGROUND

Apart from statistical analyses and statements of advice based on opinion, the amount of published scientific research on epilepsy and aquatic activity is very sparse. What there is relates almost exclusively to children.

The Honorary Solicitor to the Royal Life Saving Society (UK) provided advice in 1989 that "someone suffering from epilepsy should not be allowed to take any examinations of the Society". This very strict advice appearing in the Minutes of a meeting of the Society's Medical Panel, prompted a literature review and the formulation of a policy for Surf Life Saving Australia.

Considering that epilepsy affects about 1 in every 200 of the population, and that aquatic activities are so common, the lack of medical literature is a little surprising. Almost all of it refers to children.

The most recently published study, testing swimmers with epilepsy was undertaken by Dr Matsuoka in Osaka (Japan). He performed EEG tests (brain wave recordings) on 30 children of normal intelligence who had been free from seizures for more than one year. Their ages ranged from 7 to 12 years. The EEG was carried out before, during and after two swims. The epileptic spike discharges decreased from 9.2% at rest to 4.1% during the first swim to 2.4% during the second swim.

The authors concluded that swimming does not make epileptic discharges worse, and further, swimming is not a risk factor for children with epilepsy if they are well controlled with anti-convulsants and have normal intelligence.

The literature is clear on a number of things:

- i. Drowning is a rare cause of death in children with epilepsy if they are mentally normal and are properly supervised in the water. The domestic bath is a much more common site for death than is the ocean.
- ii. Individuals with well controlled epilepsy who have not had a seizure in the previous two years should not have their lives compromised in any way provided they are aware of the possibility of recurrence of their problem. Such people would most likely be under the care of a medical practitioner.
- iii. People with poorly controlled epilepsy are at risk in or out of the water and should have all aquatic activities closely supervised.
- iv. Flickering light is a rare trigger for epilepsy and individuals with that problem must be aware of the potential risk to them of sunlight shining on to the surf.

The following statement has the support of the Australian Association of Neurologists whom very correctly point out that **we are not presenting rigid rules but guidelines which may need to be varied in a rational way in different circumstances.**

PART ONE: WITHIN SLSA

Preamble

An active patrolling member of Surf Life Saving Australia must be in excellent physical and mental health, a state which requires considerable personal discipline.

The performance of resuscitation requires great skill, and a prolonged or difficult rescue places enormous demands on the mind and body of the rescuer. All lifesavers must be aware of these obligations and risks of membership.

Because the health of lifesavers may influence their ability to perform efficiently, it is necessary for the Association to determine policy on certain relatively common and important medical conditions.

Epilepsy is a condition characterised by recurring muscular seizures with loss of consciousness. A seizure occurring in, or even near the water may result in drowning unless rescue is effected very promptly. Epilepsy does not preclude a person from being a surf lifesaver but the Association must determine guidelines for participation. These are very similar to those that apply to eligibility to hold a motor vehicle driver's licence.

Policy

The general rule is that persons suffering from epilepsy are medically eligible for all surf life saving awards, patrol duties and competition provided they have been free of seizures for two years. This is irrespective of whether medications are being taken or not.

3.3 Cessation of Medication

When a lifesaver, acting on medical advice, stops taking anti-convulsant medication, that lifesaver should not engage in patrols, competition or any other form of ocean swimming for a period of three months.

3.4 Recurrence

Where a qualified member has a recurrence of seizures, the circumstances dictate what further action is required.

Where the seizure is the result of any of the following, a further six months must elapse without seizure before patrols or competition can be resumed;

- i. medication omitted or forgotten
- ii. inadequate sleep
- iii. physical exhaustion
- iv. no obvious cause

Where the seizure has occurred following withdrawal of medication on medical advice a minimum period of one month must elapse before patrols or competition can be resumed.

Where the seizure is the result of:

- i. alcohol abuse
- ii. head injury or
- iii. brain surgery

patrols and competition may not be resumed for a further two years.

If a lifesaver with a history of epilepsy is subject to unreliable, erratic or in-compliant behaviour, SLSA may require a Neurologist's report supporting the member's continuation as a full active member. A copy of this report must be sent to the National Medical Officer before normal patrols and competition are allowed to continue.

New Cases of Epilepsy

Where a currently qualified, active lifesaver develops epileptic seizures, a two year period free from seizures will be required before patrols and water competition are allowed. Beach events will be allowed after one year free from seizure.

PART TWO: ADVICE TO THE PUBLIC

Epilepsy and the Surf

Surf Life Saving Australia has carefully considered the advice that should be given to individuals who suffer from epilepsy and use the ocean for recreation

The following guidelines are provided:

- i. If an unsupervised person, child or adult has a seizure in the water, it is likely that this will be fatal. Fatalities in bath tubs, swimming pools and the ocean, and near drownings of children who suffer from epilepsy have been well documented. People with this condition and their families must be aware of these facts, and must bear a high level of responsibility for their personal actions.
- ii. Surf swimming and the use of boards and skis are quite different from swimming in a pool.
- iii. Supervision is much more difficult in the ocean.
- iv. Retrieval and rescue, similarly, may require experience, specialised knowledge and often some risk.
- v. The recommendations for ocean swimming are therefore more stringent than for backyard or even public swimming pools.

Recommendations

- i. Individuals who suffer from epilepsy, child or adult, should not swim at a beach unless they have been free of seizures for at least one year.
- ii. They should not swim for at least three months after cessation of medications.
- iii. They should not swim alone. Companions should be aware of the potential for seizures and the possible need for rescue.
- iv. They should never hyperventilate for any reason and this is especially important prior to swimming and diving.
- v. They should never engage in SCUBA diving.
- vi. Parents who wish to take their children who suffer from epilepsy to the beach for a time of recreation and fun should not be afraid to do so provided they are prepared to watch their children at all times. They should only venture into shallow water on a safe sand bank with gentle small waves. Direct contact should be maintained at all times.

SLSA issues a reminder that the common triggers for epileptic seizures are:

- a) alcohol
- b) fatigue and lack of sleep
- c) omitting medications
- d) hyperventilation while at rest

In addition some experts believe that extremes of exercise (as in competition) may trigger seizures.

Surf Board Riding

The advice given to board riders, surf ski paddlers, and other craft users is along lines similar to the rules for competing and patrolling surf lifesavers. In addition they are advised always to surf with friends who are aware of their condition and are familiar with the principles of surf rescue and resuscitation.

The general guideline is that board riders are medically suitable to ride their boards provided they have been free of seizure for two years. This is irrespective of whether or not medications are being taken. If medications are stopped on the advice of a doctor, then the surfer should not enter the water for a period of three months.

Recurrence

Where a board rider has a recurrence of seizures, the circumstances of the seizure dictate what further advice should be followed.

Where the seizure is the result of any of the following, a further six months should elapse without seizure before board riding is resumed:

- i. medication omitted or forgotten
- ii. inadequate sleep
- iii. physical exhaustion
- iv. no obvious cause.

Where the seizure has occurred following withdrawal of medication on medical advice, a minimum period of one month should elapse before board riding is resumed.

Where the seizure is the result of alcohol abuse, head injury or brain surgery, board riding should not be resumed for a further two years.

Any person with a history of heavy drinking, unreliable, erratic or in compliant behaviour, should not ride a surf board.

New Cases of Epilepsy

Where a board rider develops epileptic seizures for the first time, a two year period free from seizures is advisable before board riding and surf swimming are resumed.