What is NES?

Non-Epileptic Seizures are episodes of abnormal movements, sensations, or behaviors, with or without changes in consciousness that look like epileptic seizures, but are not caused by an epileptic discharge in the brain.

There are two types of NES:

Physiologic NES are due to disruption of brain function from physical or chemical factors, such as fever, low blood sugar, alcohol withdrawal, or heart rhythm abnormality, among others. Psychogenic NES (PNES) can be associated with stressful psychologic events like trauma from physical or sexual abuse, military PTSD, and other stressors. Unconscious processes and unresolved conflicts lead to bodily displays that look like epileptic seizures but aren’t.

How are PNES Diagnosed?

Video electroencephalography (vEEG) can establish a diagnosis of PNES. This test records your brain waves while you are being video-recorded. The brain waves during seizure-like events are reviewed by an epilepsy specialist. This person can determine if there are abnormal electrical discharges and if these are linked with the seizure-like events observed on camera. If there is no correlation between the two, and the history and characteristics of the event are consistent with psychogenic nonepileptic seizures (PNES), the diagnosis can be made.

What is the Treatment?

There are treatments that work to alleviate the symptoms.

• Since these are not epileptic seizures, they are not treated with anti-seizure medications.
• Treatment of PNES is best provided by mental health specialists who can identify the psychologic factors that contribute to PNES and help people manage (and even reduce) these events.
• Therapies include stress management, coping skills, biofeedback, group support, family therapy, and cognitive behavioral therapy.
• Medications for PTSD, anxiety and depression are also important.

For best care:

• Continue treatment and stay in close contact with health care providers who know about PNES.
• Get support from your treatment team, family, friends and community.
LIVING WITH PNES

Driving
Many people with PNES have stopped driving, since they have carried a diagnosis of epilepsy.
- Driving regulations differ in each state regarding patients with PNES.
- Decisions about driving should be discussed between you and your psychiatrist or neurologist.

PNES in Veterans
- Remember that PNES are not purposely produced — it is not your “fault” that you have them.
- 50-70% of people with PNES also may have other symptoms including PTSD, depression or anxiety.
- Early diagnosis improves outcomes.
- With appropriate treatments, many people with PNES can improve.

Department of Veterans Affairs
Epilepsy Centers of Excellence
www.epilepsy.va.gov

PNES YouTube Video link: https://www.youtube.com/watch?v=NIX-yNTX86w

Other Resources:
Epilepsy Foundation
www.epilepsyfoundation.org
800-EFA-1000