Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

First Tonic- Clonic Seizure

Version number: **5**
Last modified date: **12th November 2026**

First Tonic-Clonic Seizure

Patient Information

Emergency Department

- Author ID: CB
- Leaflet Ref: ED 001
- Version: 5
- Leaflet title: First Tonic-Clonic Seizure
- Last review: February 2023
- Expiry Date: February 2025

Information from the Emergency Department following a suspected first tonic-clonic (previously called: grand-mal) seizure

If you have had one suspected tonic-clonic seizure, you may never have another. However, it's natural to worry that this might happen. This leaflet is to show your family or carers what to do if you do have another tonic-clonic seizure. It also looks at other issues such as safety, the driving laws, and work.

What happens in a tonic-clonic seizure?

You go stiff, lose consciousness and, if you are standing, fall to the ground. You have jerking movements and because your breathing pattern has changed, you might get a blue tinge around your mouth. You might lose control of your bladder or bowels or both. You might bite your tongue or the inside of your mouth. After a minute or two, the jerking stops and you will slowly return to consciousness. You will probably be tired, confused, feel sore and have a headache afterwards.

First aid for tonic-clonic seizures

Here's how to help if you see someone having a tonic-clonic seizure.

Do:

- Protect them from injury (remove harmful objects from nearby)
- Cushion their head
- Time how long the seizure lasts

- Aid breathing by gently placing them in the recovery position once the jerking has stopped

- Stay with the them until they are fully recovered

Don’t:

- Don’t restrain their movements

- Don’t put anything in their mouth

- Don’t try to move them unless they are in danger

- Don’t give them anything to eat or drink until they are fully recovered

- Don’t attempt to bring them round

Call an ambulance if:

- You know it is the person’s first seizure, or

- The seizure lasts for more than five minutes, or

- One seizure follows another without the person gaining consciousness between seizures, or

- The person is injured, or

- You believe the person needs urgent medical attention.

Some people need to rest for a few minutes after a seizure. Others may need to sleep for some time.

Seizure Record for Witnesses

If it happens again, we need as much information as possible. It would be helpful if someone can record the seizure on their mobile phone. If they are not able to, a detailed description is helpful. Think about writing a description of what happened before, during and after the seizure, for example, the type of movements the person made, did they look any different, how long did it last for. This information should be brought to any future appointments.

Driving – The Law

If you hold a driving licence, it is your legal responsibility to inform your driving agency of any medical condition that could affect your driving. This includes any episodes of loss of consciousness or altered level of consciousness. If you live in England, Scotland or Wales, this is the Driver and Vehicle Licensing Agency (DVLA). If you live in Northern Ireland, it is the Driver and Vehicle Agency (DVA). You should not drive until your Driving Agency says you can.

Safety

Because there is some risk that you could have another seizure, it makes sense to think about safety. This doesn't mean you will have to stop doing all the things you usually do. But it may mean putting things in place to keep risks to a minimum. Here are some examples. If you are having a bath or shower, consider having someone with you or just outside the door, checking that you are safe. If you have free-standing heaters, try to place them where they are least likely to be knocked over during a seizure. Try to avoid placing your bed against a wall or next to a radiator. This can prevent you knocking your limbs on the wall or burning yourself on the radiator during a tonic-clonic seizure. Place saucepans on the back burners and with the handles away from the edge of the cooker, so you can't knock them over.

Seizure triggers

There are some things called triggers, which make seizures more likely for some people. However, not everyone has a trigger for their seizures. Common triggers are stress, lack of sleep or drinking large amounts of alcohol.

Work

Depending on the type of work you do, you may need to take some precautions for a while. Talk to your manager, to make sure.

Epilepsy Helpline

Freephone: 0808 800 5050

Text: 0753 741 0044

Email: helpline@epilepsy.org.uk

Tweet @epilepsyadvice

www.epilepsy.org.uk



Version number: **5**
Last modified date: **12th November 2026**

All rights reserved © 2026
WWL Teaching Hospitals NHS Foundation Trust