

AMERICAN ACADEMY OF PEDIATRICS

Committee on Children with Handicaps and
Committee on Sports Medicine

Sports and the Child with Epilepsy

The 1968 statement of the Committee on Children with Handicaps, "The Epileptic Child and Competitive School Athletics," is restated with considerable modification.¹

The responsibility for weighing the risks involved in athletic participation should be shared by the parents, the physician, and the child. Such risks should be weighed against the psychological trauma resulting from unnecessary restriction of physical activities. Parents should participate in all decisions. To the degree appropriate to the age and judgment of the child, his or her wishes should be considered. The young athlete must be taught that there is a risk of injury and he or she should be prepared to impose voluntary restrictions on physical activity depending upon the nature and frequency of seizures.

Proper medical management, good seizure control, and proper supervision are essential if children with epilepsy are to participate fully in physical education programs and interscholastic athletics. Common sense dictates that situations in which a seizure could cause a *dangerous* fall should be avoided. These situations include rope climbing, activity on parallel bars, and high diving. Swimming should be supervised; no competitive underwater swimming is acceptable. Participation in contact or collision sports should be given individual consideration according to the specific problem of the athlete. Epilepsy per se should not exclude a child from hockey, baseball, football, basketball, and wrestling.

Physicians who take care of children who are involved in athletics should realize that in today's culture, sports and athletic activity are extremely important to young people and that unnecessarily

strict interpretation of medical conditions may in fact do more harm than good.

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REFERENCES

1. Bennett PB, Elliott DH: *The Physiology and Medicine of Diving and Compressed Air Work*, ed 2. Baltimore, Williams & Wilkins, 1975
2. Committee on Children with Handicaps, American Academy of Pediatrics: The epileptic child and competitive school athletics. *Pediatrics* 1968;42:700
3. Committee on the Medical Aspects of Sports, American Medical Association: Epileptics and contact sports. *JAMA*

This statement has been approved by the Council on Child and Adolescent Health.
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- 1974;229:820
4. Committee on School Health, American Academy of Pediatrics: *School Health: A Guide for Health Professionals*. American Academy of Pediatrics, Evanston, IL, 1981.
 5. Korezyn AD: Participation of epileptic patients in sports. *J*

- Sports Med* 1979;19:195
6. Livingston S, Berman W: Participation of the epileptic child in contact sports. *J Sports Med* 1974;2:170
 7. Pearn J, Bart R, Yamaoka R: Drowning risks to epileptic children: A study from Hawaii. *Br Med J* 1978;2:1284
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NATIONAL PERINATAL EPIDEMIOLOGY UNIT

The fifth report of [Britain's National Perinatal Epidemiology]. Unit's work has just been published (Annual Report. National Perinatal Epidemiology Unit, Radcliffe Infirmary, Oxford, 1982). It is a record of hard work in Oxford and cooperation with centres throughout the world. Workers at the unit have advised on projects from Canada to China while visitors from many countries have beaten a path to the door in Oxford to work with and get advice from the unit. The research programme is a mixture of originally generated data and analyses of statutory collective information from government sources . . . reasoned arguments based upon past data is as important as generating new information, and the National Perinatal Epidemiology Unit shows a good record of keeping us up to date on both scores. Much of what the professionals do in their day-to-day work needs objective audit and here is a record of how it can be done properly.

Submitted by Student

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