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Opinion Article

Neurological Disorder: Epilepsy in Patients with Autism Spectrum

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DESCRIPTION

Epilepsy is a typical neurological disease that is characterized by an improved probability of experiencing seizures, events of pathological, hypersynchronous activity of neural networks. The growth of epilepsy is affected by complex interactions between genes and the environment, and is most normal in young and old populations. The majority of people with epilepsy can control their seizures through medication or through surgery. Seizures can be controlled in some people for the rest of their lives, while others eventually go away. With age, some epileptic children may outgrow the condition. Antiseizure drugs can be used to control seizures, these medications that inhibit seizures from development and propagation; some other treatments are requiring surgical resection or novel methods of controlling seizures. Identifying therapeutic targets that can stop epilepsy from developing, understanding unexpected deaths, and addressing the causes of behavioral impairments and brain damage are some of the current difficulties.

Epilepsy can happen to anybody. Males and females of all races, ethnicities, and ages are affected by epilepsy. Seizures can cause a wide range of symptoms. During a seizure, some epileptics simply stare blankly for a few seconds, while others twitch their arms or legs repeatedly. A single seizure does not necessarily mean that we have epilepsy. Typically, at least two uncontrolled seizures that occur at least 24 hours apart without an identified activation is required for an epilepsy diagnosis.

Seizures can affect any process your brain coordinates because epilepsy is caused by abnormal brain activity. Some of the signs and symptoms of a seizure are:

- Confusion for a short period of time
- A spell of staring
- Stiff muscles
- Rapid, uncontrollable arm and leg movements
- Loss of consciousness or awareness
- Psychological symptoms like fear, anxiety

Epilepsy is more prevalent in autistic people than in the general population, and symptoms typically begin in adolescence. If someone in the family has epilepsy, it is more likely to occur. In families with epilepsy, autism is also more likely. Autism Spectrum Disorders (ASD) sufferers usually experience seizures. While epilepsy affects 1-2% of children in the general population, it is much more common in Autism Spectrum Disorders (ASD) children. Seizures can occur at any age, from childhood to adulthood for some with Autism Spectrum Disorders (ASD).

It is interesting to note that certain autism subgroups are more likely to develop epilepsy and seizures. Specifically, people who have concurrent intellectual disabilities, genetic abnormalities, or brain malformations. The connection between autism individuals increased mortality and morbidity from seizures is the most concerning issue. They are the leading cause of preterm death for adults with autism.

Autism-related seizures can be difficult to diagnose. This is because it is hard to differentiate the subtle signs of seizures from the characteristics of autism because of overlapping symptoms like staring episodes, motor tics, and stereotyped movements. Nevertheless, due to the fact that they are treated in very different ways, it is essential to determine whether these symptoms are caused by seizures or another neurological abnormality.

CONCLUSION

Surgery to be viewed as an additional tool for treating epilepsy. It is most effective when a child's development and interpersonal relationships are being disrupted by partial seizures or medical treatment for them. Medical management will be greatly simplified the surgery, and in many cases, seizures will be completely eliminated.

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Received: 01-Nov-2022, Manuscript No. AUO-22-20825; **Editor assigned:** 03-Nov-2022, Pre QC No. AUO-22-20825 (PQ); **Reviewed:** 17-Nov-2022, QC No. AUO-22-20825; **Revised:** 24-Nov-2022, Manuscript No. AUO-22-20825 (R); **Published:** 02-Dec-2022, DOI: 10.35248/2165-7890.22.12.353.

Citation: Tylor J (2022) Neurological Disorder: Epilepsy in Patients with Autism Spectrum. Autism Open Access. 12:353.