Status Epilepticus
- ≥5 minutes of continuous seizures,
- ≥2 discrete seizures with incomplete recovery of consciousness between the events

Initial Assessment
- Secure airway,
- Oxygen supplementation
- IV access with 2 large bore canulas – start anti-convulsant immediately
- Monitor respiration, blood pressure, monitor SpO2.
- Administer Inj. Thiamine 100 mg IV, followed by 50 mL of 50% dextrose if random blood glucose testing is not available.

Start anti-convulsant therapy
Intravenous Lorazepam up to 0.1 mg/kg
or
Intravenous diazepam up to 0.25–0.4 mg/kg

Seizures continuing?

Intravenous phenytoin 20 mg/kg at 50 mg per min
or
Intravenous valproic acid 20-40 mg/kg at 5 mg per kg per min

Seizures continuing?

Additional intravenous Phenytoin 5-10 mg/kg

Seizures continuing?

Admit in ICU. Will need to be treated as refractory status epilepticus (next box)
Endotracheal intubation may be required for securing airway.

Seizures stop

Out of hospital therapy

Diazepam Rectal 2-5 years 0.5mg/kg, 6-11 years 0.3mg/kg, ≥12 years 0.2g/kg (max 20mg)

Buccal midazolam: midazolam(0.5mg/kg) up to Max 10 mg squirted around the buccal mucosa after parting the lips, but without trying to open the jaws

Intranasal Midazolam (0.2mg/kg)

Refractory status epilepticus

Pharmacologic Coma

Midazolam loading 0.2 mg/kg followed by infusion @ 0.1–2 mg/kg/h
or
Propofol loading 2–5 mg/kg, infusion @ 2–10 mg/kg/h
or
Pentobarbital loading up to 10 mg/kg followed by infusion @ 0.5–2 mg/kg/h
or
Thiopental loading with 3 to 5 mg/kg bolus, followed by infusion@ 3 to 5 mg /kg/hr.

Ketamine bolus 1.5 mg/kg followed by infusion @ 0.01–0.05 mg/kg/h (contraindicated in raised intracranial pressure)

Inhalational General anesthesia

Pharmacologic Coma Management
- Titrate infusions to either seizure suppression or burst suppression based on continuous EEG monitoring.
- Continue pharmacologic coma for 24-48 hours.
- Add ‘Add-on AEDs’ (Box 1) before weaning off infusions.

Figure 2: Management of Status Epilepticus.

Abbreviations: IV, Intravenous; ECG, Electrocardiogram; SpO2, Pulse oximeter oxygen saturation; CSF, Cerebrospinal fluid; CNS, Central nervous system; CT, Computed tomography; MRI, Magnetic resonance imaging; EEG, Electroencephalogram; AED, Anti epileptic drug; IVIG, Intravenous immunoglobulin.