



Discharge Information and Instructions after Seizure Surgery

Many patients share the same concerns after having seizure surgery: What can I expect? How should I take care of my incision? When can I go back to work or school? Do I still need to take my antiepileptic medications? What should I do if I have a question once I leave the hospital?

The following general information is intended to answer these questions. Please keep in mind, however, that each patient is unique. Some patients may recover more quickly than others, while some may take a bit longer. If you do not find the answer to your questions here, please ask your nurse or doctor for additional information.

What to Expect

Swelling and bruising on the scalp and sometimes on the face are common after temporal lobectomy. These changes usually resolve within 4-6 weeks after surgery. Most patients experience headaches during the first few weeks after surgery. The headaches will gradually become less frequent and less intense.

Other effects of the surgery may include decreased ability to concentrate, forgetfulness, and word finding difficulties. In most cases, these problems will gradually improve during the next few weeks.

Many patients tend to tire very easily after the operation, especially in the first few days after discharge from the hospital. While everyone heals differently, most people feel back to normal, or nearly so, within 4-6 weeks after surgery.

Care of the Incision

Your staples should be removed 10-14 days after your surgery. You may return to UCSF and have one of our neurosurgery nurses remove them for you or you may arrange to have your local physician remove them. Please let us know what you prefer prior to your discharge.

- Wounds heal best in a clean moist environment.
- It is safe to shower 5 days after surgery with regular shampoo. Gently shampoo hair and incision to soften scabs and dead skin cells around the wound. Pat incision and area around the incision dry. Do not blow dry near the incision.
- You may apply a thin layer of antibiotic ointment (i.e. Bacitracin over the counter) to the incision daily to keep the incision moist. The wound can be left open to air or you may place a small dressing to prevent ointment from getting on clothing. Use non-stick dressings and minimal adhesive tape around incision.
- Small amounts of bleeding may occur as the wound is healing, blot dry with a clean tissue and apply gentle pressure.

- Sutures and staples can be removed 10-14 days after surgery by a primary care physician, nurse practitioner and/or registered nurse.
- Call the neurosurgery clinic at (415) 353-2241 if you notice any drainage, puss, increased swelling or redness.

Activity

You may be up and around as soon and as much as you feel able. Daily walks are encouraged. When you feel tired or have headaches, stop and rest. Gradually increase your activity so that you are back to your normal activity level in about 4-6 weeks.

Medications

Anticonvulsants - You will continue to take the same anticonvulsant medications after surgery that you were taking before surgery unless your epilepsy doctor has instructed you otherwise. You will likely remain on anticonvulsant medications for a minimum of 2 years, even if you are not having any seizures, unless otherwise directed by your doctor.

Steroids - Since your surgery, you have been receiving a steroid medication to help reduce brain swelling. This medication is called Decadron (dexamethasone). Some potential side effects of this medication include:

- sleeplessness
- increased appetite
- acne
- fluid retention

You will gradually be tapered off this medication over the next 2 to 3 weeks. During the steroid taper, there may be symptoms of “withdrawal” including:

- increased headache
- slight neck, lower back or leg stiffness
- irritability
- low grade fever
- mild swelling under the incision

If severe headaches, high fever (greater than 101° F) or neck stiffness occurs, call as directed below.

In addition, your doctors may have prescribed some additional medications to assist in the healing process. Please take the medications exactly as they have been prescribed.

When to Call for Help

- Severe or increasing headaches, not responding to pain medication.
- Drainage, pain, or failure of the incision to heal.
- Fever >101° F.
- A significant increase in seizure frequency, intensity, or duration that is unusual for you.
- If you have any questions, problems, or concerns not addressed here.

