

# Web Eagle

### March 2019

Welcome to the Web Eagle, your monthly source for the latest product and industry news from United Security Assurance. For producer use only.

### **Quote of the Month**

"Believe you can and you're halfway there."

Theodore Roosevelt, 26th US President

### e-Applications

You can access state-specific e-Apps for our **SecureHorizons** STC plan and **LSS** series of LTCi products at our <u>Agent</u> <u>Portal</u>\*.

### **Faxing Applications**

We can accept faxed applications with voided checks at this secure, toll-free number

888-976-5969.

Download your copy of the <u>fax cover sheet</u>.

### **Quoting Software**

Our quoting software can be downloaded from our website\*. Contact us if you are unable to download the quoting software, or if you would like to have an illustration done for you.

Our LSS and LSS Select LTCi products, and

## How to Afford Long Term Care

Almost half of all new long term care insurance claims begin for policyholders age 86 or older, according to a new study released by the American Association for Long-Term Care Insurance (AALTCI). According to the Association's analysis of new long term care insurance claims that began during 2018:

- 25% of new claims were initiated by policyholders between ages 81 and 85
- 27.2% were between ages 86 and 90
- 17.5% were age 91 or older

### Read more...



# Underwriting Corner<sup>1</sup> Written By: Jennifer Howlett

**SecureHorizons** short-term home health care plan are featured on <u>StrateCision</u> <u>quoting platform</u>.

### **Ordering Supplies**

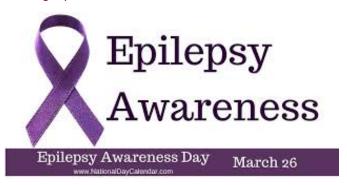
USA licensed producers can order directly from our Marketing Team, at 800-872-3044.

\*This is a secured section of our site that requires <u>registration</u>.

### **Contact Us**

673 East Cherry Lane P.O. Box 64477 Phone: 800-872-3044 Fax: 215-723-8036 www.usaofpa.com

### **Underwriting Supervisor**



The Underwriting Corner topic for this month is **Seizure/Seizure Disorder/Epilepsy.** 

A seizure is an abnormal electrical discharge that occurs in the brain due to an excess of electrical activity. A seizure is sometimes a onetime event; if one has more than one seizure a doctor may diagnose a larger disorder. There are two kinds of seizures, unprovoked (epileptic seizures) and provoked (triggered/ non-epileptic). Epileptic seizures have no apparent trigger, and they occur repeatedly. The cause of epileptic seizures is often unknown (idiopathic epilepsy), but they may be caused by various brain disorders, such as structural abnormalities, strokes, or tumors. Non-epileptic seizures are triggered by a reversible disorder or another condition that irritates the brain, such as an infection, drug reaction or fever. People with a seizure disorder are more likely to have a seizure when they are under excess physical or emotional stress, when they are intoxicated, deprived of sleep, or when they have suddenly stopped drinking or using sedatives.

When one has Epilepsy or seizure disorder, an aura may occur. An aura is a feeling, experience, or movement that just seems different, and can be a warning that a seizure is going to happen. Auras can be different for everyone; they can be physical, emotional, or sensory changes and most people experience the same thing each time an aura happens.

There are 2 main types of epileptic seizures, focal seizures and generalized seizures. A focal seizure starts in a particular part of the brain and can cause both physical and emotional effects. About 60% of people with epilepsy have this type of seizure. Symptoms of this type of seizure can be mistaken for signs of mental illness or other nerve disorder. Generalized seizures happen when nerve cells on both sides of the brain misfire, can make one have muscle spasms, black out, or fall. Some people have seizures that start as one kind and

become another, and are sometimes difficult to classify.

### There are 3 groups of focal seizures:

- Simple focal seizures: Change how the senses read the world around us; can make something smell or taste strange, make fingers, arms or legs twitch, may have visual disturbances, or feel dizzy, may feel nauseated or sweaty, not likely to lose consciousness.
- Complex focal seizures: Usually happen in part of the brain that controls emotion and memory. One may lose consciousness but look like they are awake, or one may do things like gag, smack their lips, laugh or cry. It may take someone several minutes to come out of this type of seizure.
- Secondary generalized seizures: These start in one part of the brain and spread to the nerve cells on both sides. They can cause some of the same physical symptoms as generalized seizure, like convulsions or muscle slackness

### There are 6 types of generalized seizures:

- Tonic-clonic (or grand mal) seizures: These are the most noticeable-body stiffens, jerks, and shakes, and consciousness is lost. Sometimes there is loss of bladder or bowel control. These usually last 1-3 minutes.
- Clonic seizures: The muscles have spasms, which often make the face, neck and arm muscles jerk rhythmically. These last several minutes.
- Tonic seizures: The muscles in arms, legs, or trunk tense up. These usually last less than 20 seconds and often happen when asleep, but if standing at the time, once can lose balance and fall.
- Atonic seizures: The muscles suddenly go limp, head may lean forward, if holding something, it may be dropped, and if standing, one might fall. These usually last less than 15 seconds.
- Myoclonic seizures: The muscles suddenly jerk as if been shocked, and may start in the same part of the brain as an atonic seizure. Some people have both myoclonic and atonic seizures.
- Absence (petit mal) seizures: One seems disconnected from other people and doesn't respond to them. One may stare blankly into space, and eyes might roll back in the head. These typically last only a few seconds, and one may not remember having one. Most common in children under 14.

Complications from uncontrolled seizures can include injuries

secondary to intense, rapid, muscle contractions, as well as falls and accidents. Seizures that recur and cause convulsions may eventually impair intelligence. Quality of life can be substantially reduced due to difficulty keeping a job, getting insurance, social stigmatization and inability to get a driver's license.

Diagnosis and subsequent treatment is made with neurologist consultation, review of medical history, eye-witness accounts of the episodes, symptoms before and after the episodes, as well as lab work, and other testing such as ECG (to rule out heart irregularities), CT-scans, MRI's and EEGs (test to monitor brain wave activity).

Treatment for seizures are medicines called antiepileptics, which aim to alter or reduce excess electrical activity in the brain. Examples of these medications are Phenytoin (Dilantin), Carbamazepine (Tegretol), Lamotrigine (Lamictal), Topiramate (Topamax), Levetiracetam (Keppra), Oxcarbazepine (Trileptal) and many others. Surgery may be another treatment option if one has partial seizures that are not helped by medicine. The goal of the surgery is to remove the part of the brain where the seizures begin. Diet changes can also help one with seizures; a ketogenic diet, which is low in carbohydrates and proteins, and high in fats can change body chemistry which may result in a decrease in seizure frequency. Questions to ask your client:

- 1. When were you diagnosed with a seizure disorder?
- 2. What is the cause of your seizures? Stroke? Injury? Congenital?
- 3. When was your last seizure and what type of seizures do you have?
- 4. Do you currently have an active driver's license?
- 5. How often do you follow up with a neurologist and have testing done?
- 6. Has your follow up testing or treatment changed within the past 3 years?
- 7. What treatment are you on currently?
- 8. Do you have any limitations from your seizure disorder?

As always, please call your Underwriting team with any questions you have or if you want to discuss a particular case.

<sup>&</sup>lt;sup>1</sup>All information is intended as general knowledge only and is not a substitute for medical advice for specific medical conditions. We cannot and do not give medical advice. Individuals are always encouraged to seek medical advice for any specific health issues.

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Please note it is extremely important to obtain all the person's medications since some people have more than one diagnosis and may be on a medication that is on the "unacceptable/knock out list".

Information for this article was obtained from the following websites:

https://www.healthline.com/health/seizures-vs-seizure-disorders

 $\underline{\text{https://www.merckmanuals.com/home/brain,-spinal-cord,-and-nerve-disorders}}$ 

/seizure-disorders/seizure-disorders

https://www.webmd.com/epilepsy/seizure-with-aura

https://www.webmd.com/epilepsy/types-of-seizures-their-symptoms#1

https://www.epilepsy.com/learn/treating-seizures-and-epilepsy/seizure-

medication-list

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