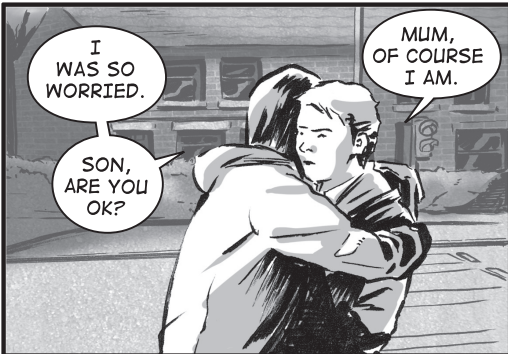


ADRENALINE ADDICTING

**A comic book about epilepsy
by Andy Luke and Stephen Downey**

UnLtd*

NOT FOR SALE



EVERYBODY IS LOOKING AT ME.



I DON'T BELIEVE IT.

HERE I AM.

WHY DID MUM MAKE UP
SUCH A STUPID STORY?



I'M TRON.



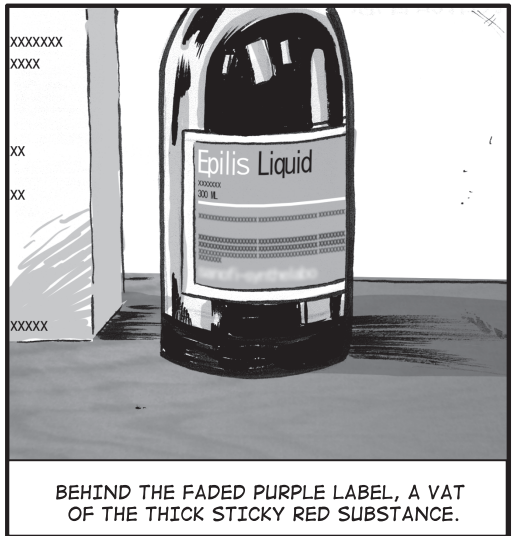
THE GLUEPADS HOLDING
THE WIRES IN ARE
LIKE LICE TO GET OUT.



NOW
ANDREW, YOU
NEED TO TAKE
THIS.

MUMMMMMMMMM!

IT
LOOKS LIKE
BLUDD!



BEHIND THE FADED PURPLE LABEL, A VAT
OF THE THICK STICKY RED SUBSTANCE.



WOULD YOU KNOW WHAT TO LOOK FOR?

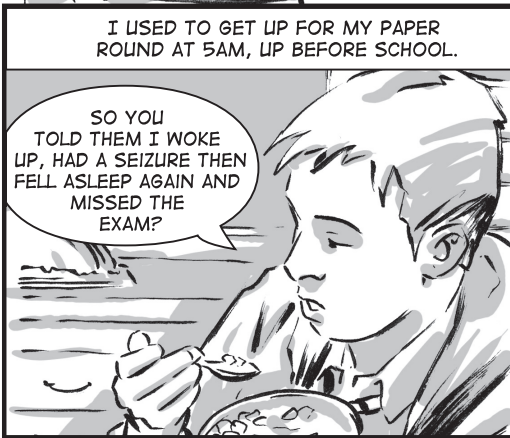
DO YOU KNOW WHAT TO DO?



THAT'S WHAT IT WAS TO ME AT THE BEGINNING; BELIEVED AS A DAY OFF SCHOOL.

YOU SHOULDN'T HAVE TO FAIL YOUR HISTORY GCSE - YOU'VE WORKED VERY HARD AT IT.

I SLEPT IN. I GUESS I'LL JUST HAVE TO GET OVER IT.



I USED TO GET UP FOR MY PAPER ROUND AT 5AM, UP BEFORE SCHOOL.

SO YOU TOLD THEM I WOKE UP, HAD A SEIZURE THEN FELL ASLEEP AGAIN AND MISSED THE EXAM?

MORNING JERKS AKA CORNFLAKE EPILEPSY EVEN "FLYING SAUCER EPILEPSY"



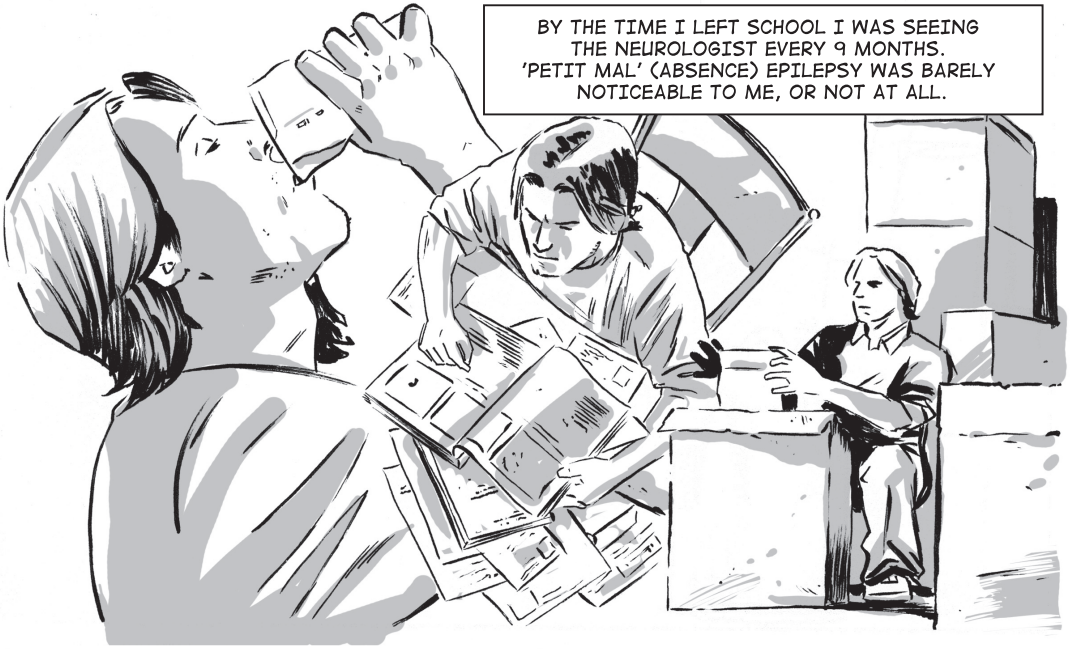
MY FAVOURITE TUTOR DRIVES ME HOME IN HER CAR AFTER A SCHOOL AFTER-HOURS ACTIVITY.



I'VE GOT EPILEPSY.



IRROOOOOOM!

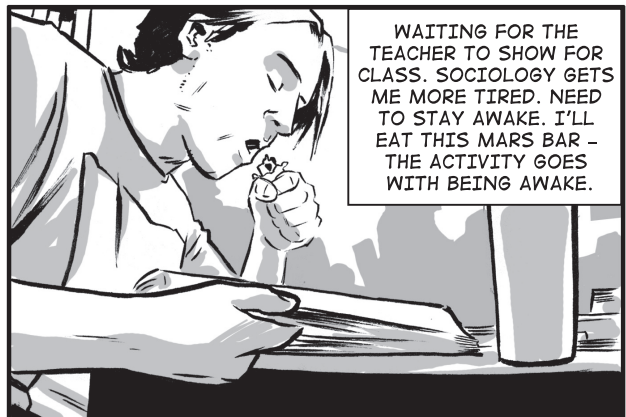
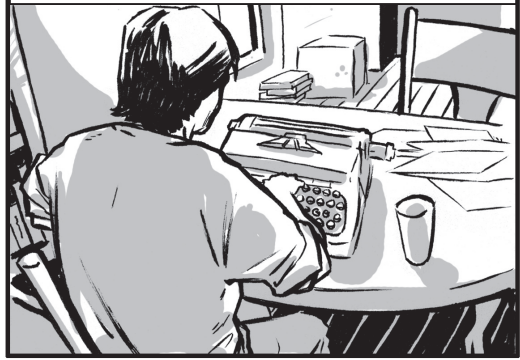


BY THE TIME I LEFT SCHOOL I WAS SEEING THE NEUROLOGIST EVERY 9 MONTHS. 'PETIT MAL' (ABSENCE) EPILEPSY WAS BARELY NOTICEABLE TO ME, OR NOT AT ALL.



IT'S NOT A PROBLEM AND I SHOULDN'T LET IT GET IN THE WAY OF HAVING A NORMAL LIFE.

AND HERE'S ME, UP ALL NIGHT. I WANT TO BE A SCRIPTWRITER.

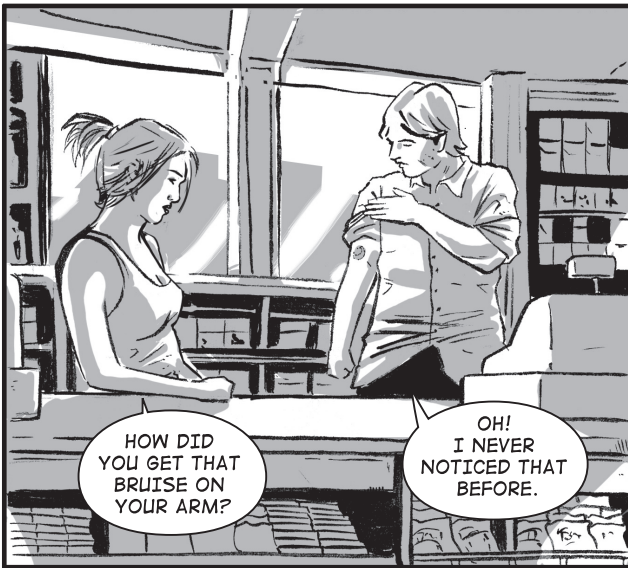


WAITING FOR THE TEACHER TO SHOW FOR CLASS. SOCIOLOGY GETS ME MORE TIRED. NEED TO STAY AWAKE. I'LL EAT THIS MARS BAR - THE ACTIVITY GOES WITH BEING AWAKE.



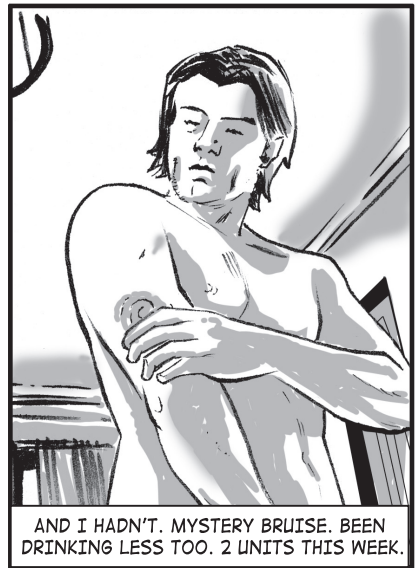
I CAN'T UNDERSTAND WHY YOU DIDN'T TELL US ABOUT YOUR EPILEPSY SOONER.

LOOK, I'D LOVE FOR YOU TO CONTINUE TO WORK HERE.

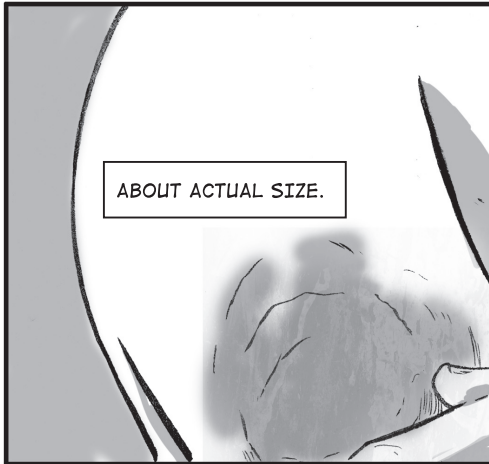


HOW DID YOU GET THAT BRUISE ON YOUR ARM?

OH! I NEVER NOTICED THAT BEFORE.



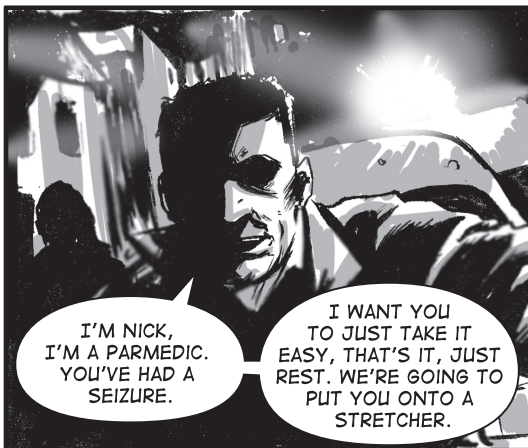
AND I HADN'T. MYSTERY BRUISE. BEEN DRINKING LESS TOO. 2 UNITS THIS WEEK.



ABOUT ACTUAL SIZE.



I TOOK UP A SECOND JOB WORKING ON A MILK FLOAT, WHICH LASTED UNTIL...



I'M NICK, I'M A PARAMEDIC. YOU'VE HAD A SEIZURE.

I WANT YOU TO JUST TAKE IT EASY, THAT'S IT, JUST REST. WE'RE GOING TO PUT YOU ONTO A STRETCHER.



I ALSO THOUGHT ABOUT THE GRAND MAL SEIZURE I TOOK IN FRONT OF THE GIRL I WAS SMITTEN WITH.

I WORKED FOR A SHORT WHILE AS A CARE ASSISTANT IN A HOME FOR VULNERABLE ADULTS.



LOOK OUT SHE'S GOING

HER GRAND MAL (TONIC CLONIC) SEIZURES WERE SO FREQUENT AND SEVERE SHE WORE A RIDING HELMET.



GET ALL THE FURNITURE OUT OF THE WAY. YOU DON'T WANT THE HEAD TO BANG OFF ANYTHING SHARP. OR ANYTHING.





NEURONS INDISCRIMINATELY FIRING

DON'T PUT YOUR FINGERS OR ANYTHING NEAR THE MOUTH. IT WILL BE FINE. LEAVE WELL.

NEURONS MISFIRING

IF THE PERSON IS MOVING AROUND, STAND BEHIND THE PERSON AND GUIDE THEM AWAY FROM DANGER.

DO NOT RESTRAIN. IT CAN MAKE A SEIZURE MORE SEVERE.

BODY-JACKED.



I'VE FELT PARTIAL SEIZURES, SPASMS, GRABBINGS BY SOME INVISIBLE FORCE.

SPEAK KINDLY.



"SOME INVOLVE A TWITCH OR RHYTHMIC MOVEMENT OF THE FACIAL MUSCLES OR HEAD OR ARMS, WHILE OTHERS INVOLVE RAPID EYE BLINKING OR ROLLING THEIR EYES UPWARD. THERE MAY BE A BLANK STARE OR BLANK LOOK INTO AN OBSERVER'S EYES (SOME CALL THESE 'HATE LOOKS') THE PERSON MAY BE INATTENTIVE OR SPACEY"

- paraphrasing FLETCHER, p. 21

"A PERSON WILL GO UNCONCIOUS AND COLLAPSE. THEY MAY CRY, THEIR BODY MAY STIFFEN AND THEY MAY CONVULSE. THE SEIZURE USUALLY LASTS A FEW MINUTES BUT THE AFFECTED PERSON WILL BE DROWSY OR CONFUSED FOR A PERIOD OF TIME AFTERWARDS. THEIR TONGUE OR CHEEK MAY BE BITTEN."

- paraphrasing MORROW, p. 11-12



ONCE THE SEIZURE HAS ENDED, STAY WITH THE PERSON UNTIL THEY REGAIN CONSCIOUSNESS. AT THIS STAGE IT'S OKAY TO SLIP A PILLOW OR CUSHION BEHIND THEIR HEAD.

THE BODY'S ENERGY WILL BE DRAINED ALTHOUGH THEY HAD NO PART IN WHAT IT DID.

PREPARE A GLASS OF WATER FOR WHEN THEY REGAIN CONSCIOUSNESS.

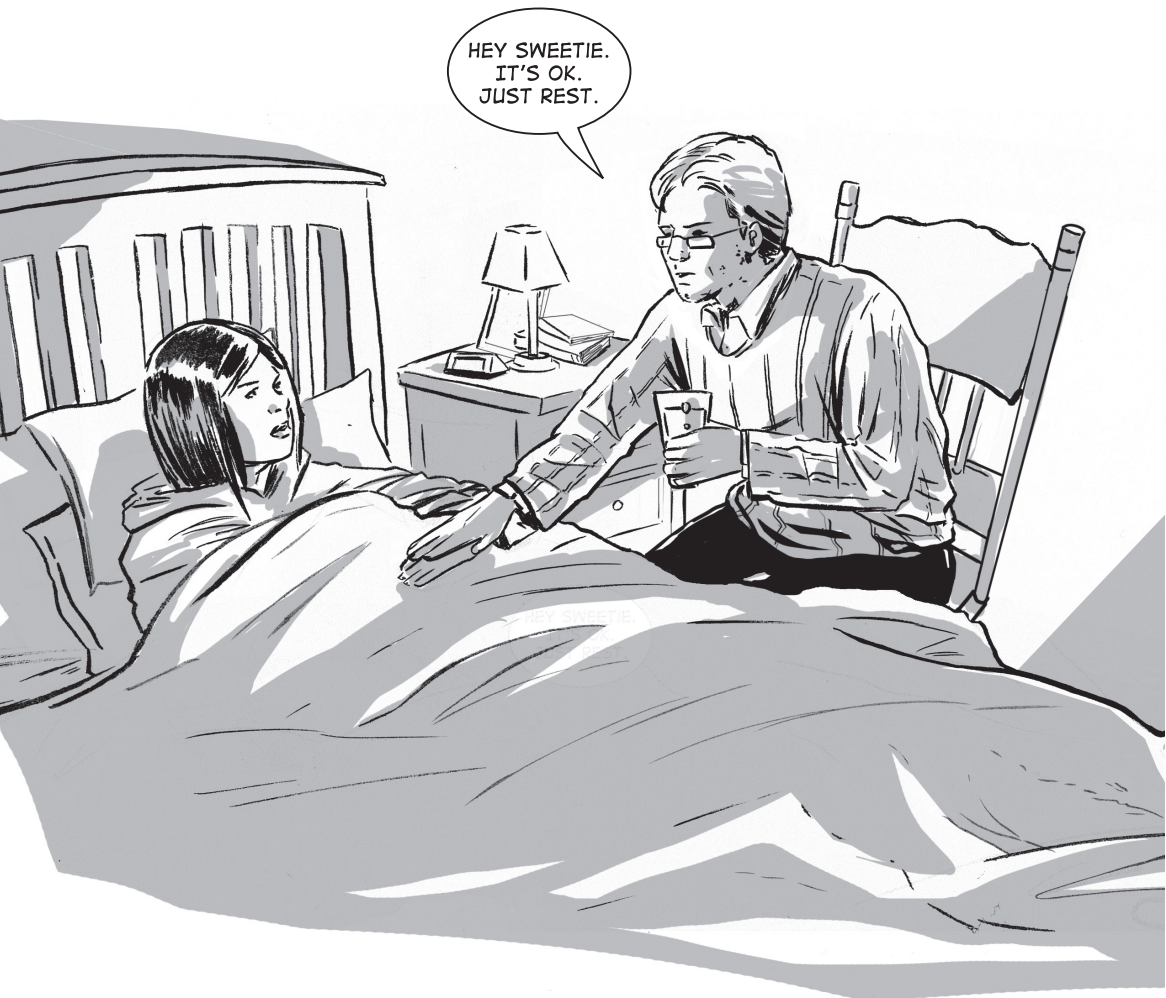
MAKE THEM COMFORTABLE.



SOME THINGS THAT CAN LOWER THE THRESHOLD LEVEL OR ACT AS SEIZURE PATICIPANTS ARE:

- EMOTIONAL STRESS (CAUSES BETWEEN 60-90% OF SEIZURES)
- EXCITEMENT
- BOREDOM, LACK OF ACTIVITY OR INTEREST
- EXTREME FATIGUE
- LACK OF ADEQUETE, REGULAR SLEEP
- POOR NUTRITION
- HYPOGLYCEMIA (LOW BLOOD SUGAR)
- CONSUMPTION OF ALCOHOL
- FEVER, COLDS, INFECTION
- DRUG ABUSE OR TOXICITY
- DRUG WITHDRAWAL
- HEAT HUMIDITY
- ALLERGIES
- MENSTUAL CYCLE
- BLADDER TOO FULL
- CONSTIPATION

-Fletcher, P.16



NOBODY WANTS TO WAKE UP WITH PARAMEDICS THEY DON'T KNOW STANDING AROUND THEM.



AFTER THAT BOLT OF UNFAMILIARITY WHO NEEDS MORE? TRY NOT TO CALL FOR AN AMBULANCE IF THE INJURIES ARE MINOR AND THEIR PRESENCE UNNECESSARY.



THE TOTAL DAWNING FROM TOTAL LONELINESS AND REALISATION OF LOSS OF CONTROL IS HEAVY TO BEAR

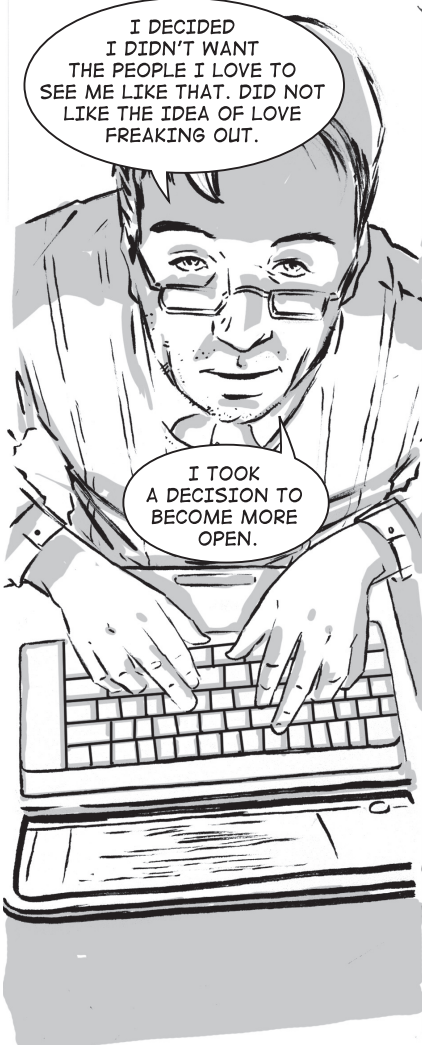
IN MYSELF DISAPPOINTED I FEEL A NEED.

REASSERT MY WILL

GET UP.

I'M NOT READY.





I DECIDED I DIDN'T WANT THE PEOPLE I LOVE TO SEE ME LIKE THAT. DID NOT LIKE THE IDEA OF LOVE FREAKING OUT.

I TOOK A DECISION TO BECOME MORE OPEN.

I BEGAN PRACTICING WHAT FLETCHER CALLS 'BIOFEEDBACK TRAINING', LEARNING TO GAIN CONTROL OVER THESE INVOLUNTARY FUNCTIONS.



WHAT'LL YOU HAVE?

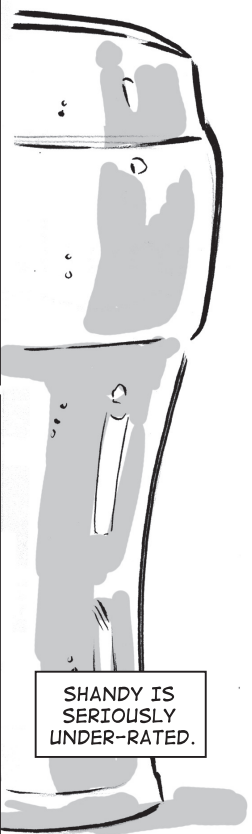
PINT SHANDY PLEASE.

"PASSIVE VOLITION", "LETTING IT HAPPEN" OR IN SITUATIONS LIKE THESE, 'SENSE'.



A SHANDY? ARE YOU ALRIGHT?

YES. I'D LIKE A SHANDY PLEASE.



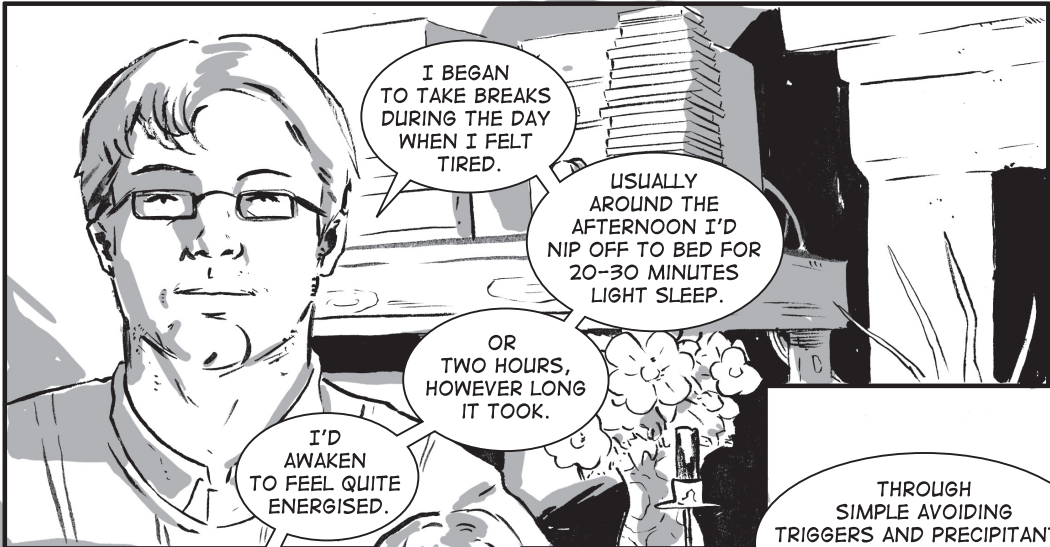
SHANDY IS SERIOUSLY UNDER-RATED.



ANOTHER THING I COULD DO...



... WAS BE TAKING AN ABSENCE I WERE IN CONTROL OF.



I BEGAN TO TAKE BREAKS DURING THE DAY WHEN I FELT TIRED.

USUALLY AROUND THE AFTERNOON I'D NIP OFF TO BED FOR 20-30 MINUTES LIGHT SLEEP.

OR TWO HOURS, HOWEVER LONG IT TOOK.

I'D AWAKEN TO FEEL QUITE ENERGISED.

ENOUGH TO GET ME THROUGH THE REST OF THE DAY.

THROUGH SIMPLE AVOIDING TRIGGERS AND PRECIPITANTS I HAD NO GRAND MAL SEIZURES FOR 11½ YEARS.

SETTLED IN ADULTHOOD - YOUTHFUL EXCESS BEHIND ME.

BEFORE THE DAYS OF MY BIG CRISPS HABIT I GOT SOME GREAT RESULTS FROM MEDIATION AND YOGA.





AN
ABSENCE IS
LIKE A PRESSED
RESET
BUTTON.

ON A FAST
PROCESSOR.



I'LL BE
CONCENTRATING/
TALKING/LISTENING/
ASKED FOR A
RESPONSE



SORRY,
I WAS...
UM...

MY
HARDWARE'S NOT
RESPONDING.

A MIND
LOST.



IT
HAS TO
FIND IT'S WAY BACK
TO FUNCTIONING
OPERATIONS.

IT'S
FINE NOW,
IT GOT TURNED
OFF THEN ON
AGAIN.



SOMETIMES
AWARE OF THE
DISPLACEMENT, GRASPING
FOR THREADS OF
CONTINUITY.

SOMETIMES
SO FAR OUT IN
SPACE-TIME,

PICKING
UP WHERE S/HE
LEFT OFF WITH NO
KNOWLEDGE OF THE
ABSENCE.



THE EYES ROLL

SPACED OUT AND UNATTENTIVE

IT'S NOT A "HATE FACE"

BODY -JACKED

FACE-JACKED

IT'S SUDDENLY VERY FAR AWAY

IT SEEMS TO KNOW NO PREJUDICE.

BULLIES, DOCTORS, STANGERS, MOTHER.

NOR LOVER

IN ALL THE YEARS ONLY ONE PERSON HAS BEEN ABLE TO 'CALL ME BACK' CONSISTENTLY.



OH,
YOU'RE
DRIFTING OUT
THERE BUDDY!
HA HA
HELLO?

MY UNIVERSITY NEIGHBOUR FROM NORTHERN INDIA, HITESH.



I THINK
YOU'RE TIRED.
WORKING TOO HARD.
YOU SHOULD
REST.

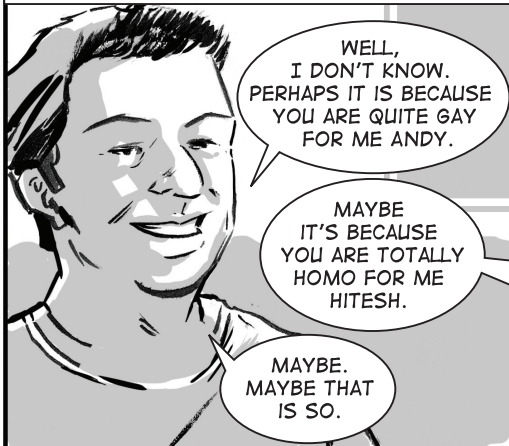
WAY OUT THERE, HIS VOICE WAS ALWAYS ABLE TO REACH MY CONSIOSNESS.

I ASKED HIM HOW HE DID IT.



I MUST
BE A WISE WISE
MAN I GUESS.
HAHA.
I DON'T KNOW. YOU
JUST SEEM TO
RESPOND TO ME.
MAYBE IT IS MY
SMOOTH
TONGUE.

THANKS, HITESH. I'M SURE THAT INFORMATION WILL COME IN USEFUL.



WELL,
I DON'T KNOW.
PERHAPS IT IS BECAUSE
YOU ARE QUITE GAY
FOR ME ANDY.

MAYBE
IT'S BECAUSE
YOU ARE TOTALLY
HOMO FOR ME
HITESH.

MAYBE.
MAYBE THAT
IS SO.

WHEN I THINK HOW LUCKY I AM TO KNOW SO MANY GREAT FRIENDS..



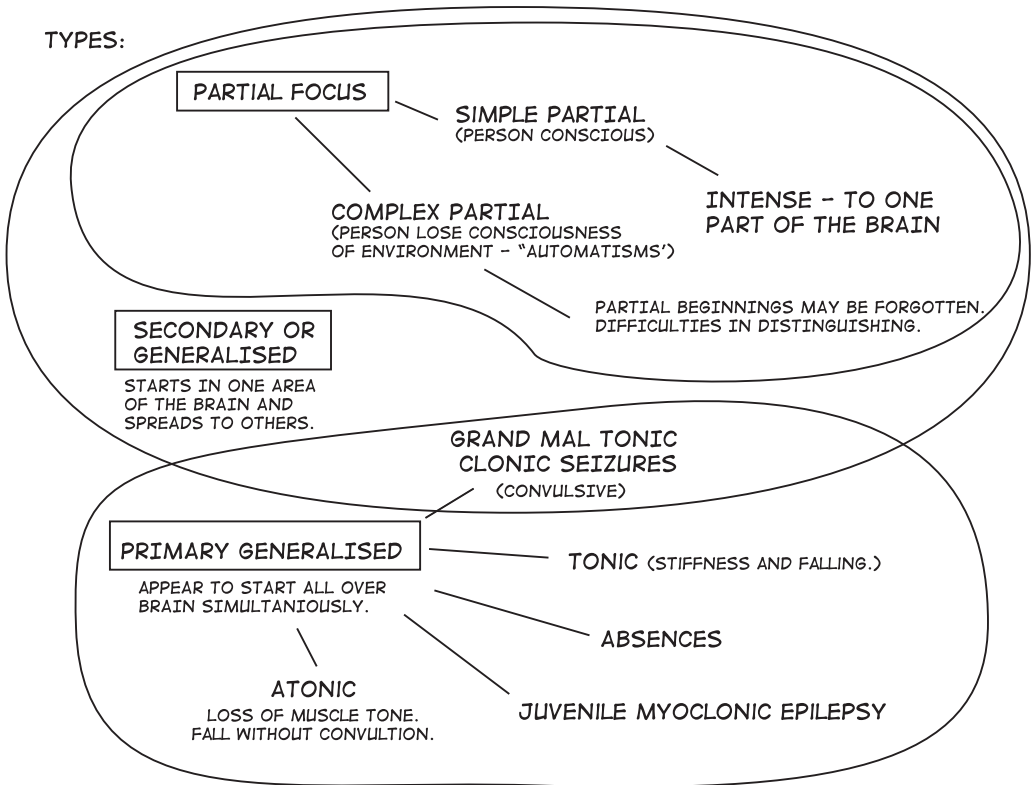
THAT TO SAY I FEEL SO ALONE.

OF COURSE IT DOESN'T MAKE ANY SENSE. BUT OF THE SEIZURE, THERE IT IS.

DOCTORS DEFINE EPILEPSIES AS "A SUDDEN ABNORMAL BURST OF INTENSE ELECTRICAL ACTIVITY IN THE BRAIN" AND DIAGNOSE IT THROUGH THREE DIFFERENT CAUSES.

THERE ARE SEVERAL BROAD TYPES AND AT LEAST MORE THAN TEN DIFFERENT SUB-TYPES. EACH OF THESE RELATE TO THE SPREAD OF ELECTRICAL ACTIVITY AND THE CONSEQUENCES.

TYPES:



THERE ARE WEIRD MYTHS AND SUPERSTITIONS ABOUT PEOPLE WITH EPILEPSY.



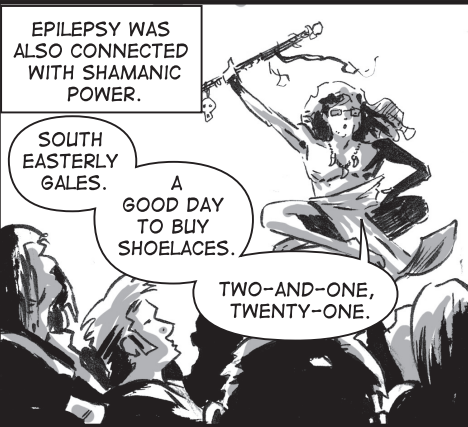
I CAN KILL YOU WITH MY BRAIN.

IN DAYS GONE BY WE WERE THOUGHT TO BE VISITED BY GODS.



AND HERA TAKES TWO SUGARS IN HER TEA.

EPILEPSY WAS ALSO CONNECTED WITH SHAMANIC POWER.

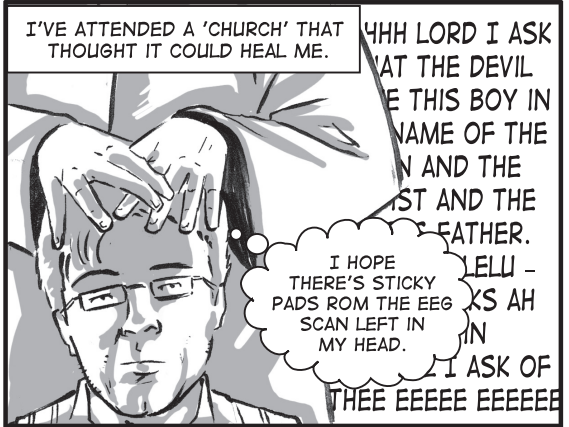


SOUTH EASTERLY GALES.

A GOOD DAY TO BUY SHOELACES.

TWO-AND-ONE, TWENTY-ONE.

I'VE ATTENDED A 'CHURCH' THAT THOUGHT IT COULD HEAL ME.



HHH LORD I ASK AT THE DEVIL THE THIS BOY IN NAME OF THE N AND THE ST AND THE FATHER.

I HOPE THERE'S STICKY PADS ROM THE EEG SCAN LEFT IN MY HEAD.

LELU - XS AH IN I ASK OF THEE EEEEE EEEEE

AND A WORK PLACEMENT THAT HAD SOME ODD IDEAS.



I'D RATHER NOT PLACE YOU WITH JOE IF YOU DON'T MIND.

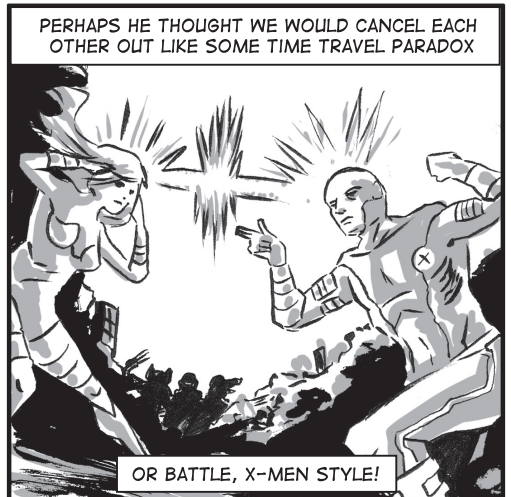
WHY?

I KNOW YOU'RE FREE FROM SEIZURE A LONG TIME..

NINE YEARS.

NINE YEARS, BUT I DON'T LIKE THE IDEA OF A CLIENT WITH EPILEPSY AND A CARER WITH EPILEPSY.

PERHAPS HE THOUGHT WE WOULD CANCEL EACH OTHER OUT LIKE SOME TIME TRAVEL PARADOX



OR BATTLE, X-MEN STYLE!

**BIO-FEEDBACK
TRAINING**

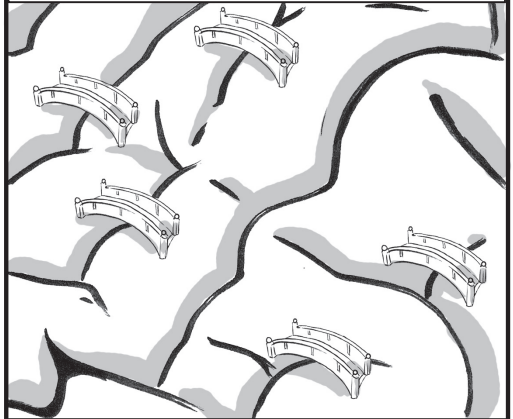
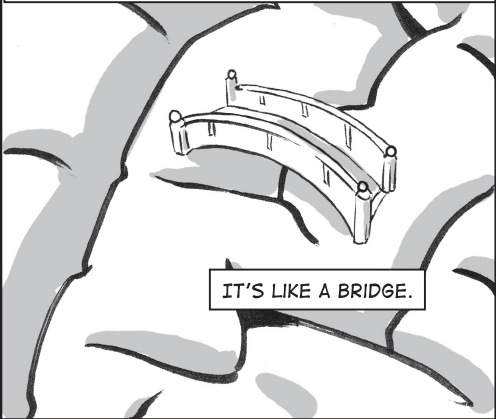
... IS ESSENTIALLY LEARNING.

IN MY 11½ YEARS WITHOUT
VIOLENT GRAND MAL WAS A
COINCIDING WITH ACCELERATED
LEARNING VARIOUS NEW SKILLS.



OF COURSE THIS MAKES PERFECT SENSE.
WHEN WE LEARN, NEW CONNECTIONS
ARE FORMED IN OUR HEAD.
NEW NEURAL PATHWAYS FOR EACH SKILL.

WHEN A SEIZURE OCCURS, NEURONS MIS-FIRE
CAUSING INVOLUNTARY ACTIVITY. BUT THE
MORE BRIDGES WE HAVE WILLED INTO PLACE THE
LESS LIKELIHOOD THERE IS OF THAT HAPPENING.



AND OF COURSE WHEN WE
RE-LEARN AND REVISE



WE STRENGTHEN THOSE BRIDGES.

THE MEMORY 'GAP' ASSOCIATED WITH EPILEPSY CAN
MAKE A SUFFERER FEEL THEIR STORY IS NOT VALID.
A WEAKNESS COMPOUNDED BY "SEIZURE ASSAULT".



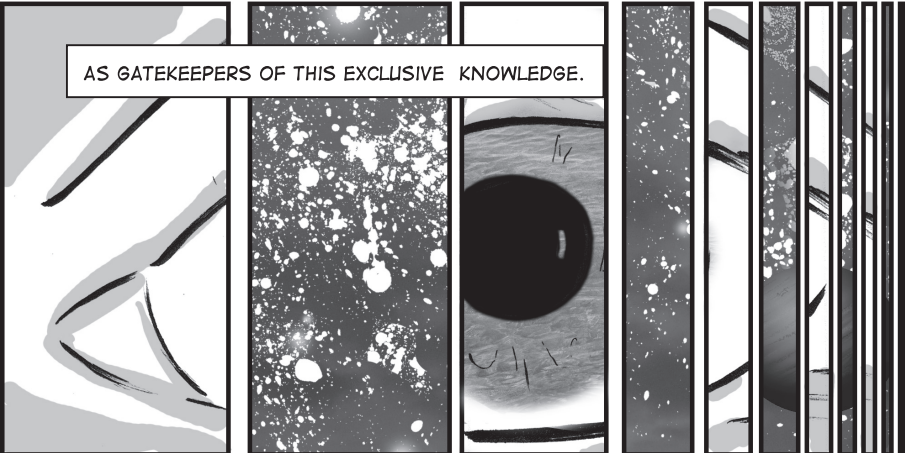
RECORDING HISTORIES BRINGS SUFFERER AND
WITNESS REALITIES TOGETHER. THIS IS VITAL
FOR DOCTOR, PATIENT AND SUPPORTERS
TO DIAGNOSE AND TREAT.



SURVIVORS SHOULD NOT BE INTIMIDATED
BY THEIR EPILEPSIES, BUT TAKE CHARGE
OF THOSE. OWN THE EXPERIENCE.



AS GATEKEEPERS OF THIS EXCLUSIVE KNOWLEDGE.





ABSENCE IS A COMIC BOOK. BASED ON THE WRITER'S EXPERIENCES OVER 30 YEARS ADAPTING TO A LIFE WITH EPILEPSIES: PUBERTY, FIRST JOBS, COLLEGE AND "SORTING IT OUT". THE BOOKLET WAS PRODUCED AND DISTRIBUTED WITH FUNDING FROM THE UNLTD MILLENNIUM AWARD SCHEME. THE STRIP WAS ADAPTED AS A DIGITAL APPLICATION FREE-OF-CHARGE BY OXICOMICS.COM AND CAN ALSO BE READ ONLINE AT WWW.ABSENCECOMIC.COM

EXCERPTS IN THE TEXT WERE TAKEN FROM CHAPTER 1 OF DR. J. MORROW'S EPILEPSY: A PATIENT HANDBOOK (2010), NSHI AND CHAPTER 3 OF S. FLETCHER'S THE CHALLENGE OF EPILEPSY: COMPLEMENTARY AND ALTERNATIVE SOLUTIONS (3RD ED, 2004) PUBLISHED BY AURA. IF YOU'D LIKE TO FIND OUT MORE ABOUT EPILEPSY THESE WORKS ARE RECOMMENDED STARTING POINTS.

YOU MAY ALSO WISH TO CONTACT THE ORGANISATION EPILEPSY ACTION (WWW.EPILEPSY.ORG.UK/), OR THE UK EPILEPSY AND PREGNANCY REGISTER, ROYAL VICTORIA HOSPITAL, BELFAST (WWW.EPILEPSYANDPREGNANCY.CO.UK)

THE COMIC WAS WRITTEN BY ANDY LUKE (GRAN, DON'T GET LOST) AND ILLUSTRATED BY STEPHEN DOWNEY (CANCERTOWN, TORCHWOOD, SLAUGHTERMAN'S CREED), BOTH BASED IN BELFAST. THE CREATORS ASSERT THEIR CREATIVE AND INTELLECTUAL OWNERSHIP OF THE PROPERTY. THEY CAN BE REACHED AT [HTTP://ANDYLUKE.LIVEJOURNAL.COM](http://ANDYLUKE.LIVEJOURNAL.COM) AND WWW.STEPHENDOWNEYGALLERY.COM RESPECTIVELY

THE AUTHORS WOULD LIKE TO THANK MUM AND DAD, DR. JIM MORROW, BRONAGH LAWSON, HITESH BANSAL, DR. TOM TYLER, SALLY FLETCHER, AIMEE DURKIN, DAVID CAMPBELL, MORTEN THOMSEN AND OXICOMICS.COM, MEABH CORMACAIN AND THE UNLTD MILLENIUM AWARDS SCHEME.

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