

Table 1**Differentiating between typical absence and focal unaware seizures**

	Typical absence seizure	Focal unaware seizures
Age at onset	Childhood/early adulthood	Any age
Warning/aura	Not present	Common - including epigastric 'rising' sensation, olfactory or gustatory hallucination, autonomic symptoms, experiential phenomena e.g. déjà vu, jamais vu and fear automatisms e.g. lip-smacking, chewing, hand rubbing
Ictal features	Appears to stare blankly or rapid blinking Stops moving or talking Slight tone changes or motor phenomena	Appears to stare blankly Awareness of self or environment may be partially or fully impaired Spectrum of motor phenomena – from simple automatisms or behavioural arrest to complex behaviour
Postictal	Not present No confusion	Confusion, sleepiness, headache, emotional disturbances are common
Duration	Less than 30 seconds	Longer than 30-45 seconds
Frequency	May be several times a day	Usually less frequent than several times per day
Other terms	Petit mal seizures	Complex partial seizures, focal impaired awareness seizures
Aetiology	Genetic or unknown generalised epilepsy	Focal pathology (limbic structures, neocortex)
EEG	3 Hz generalised spike and wave	Wide variety - depends on focal disturbance