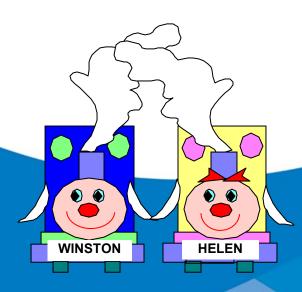


Febrile Convulsion

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What is a febrile convulsion?

- A febrile convulsion (fit) is a common medical condition in young children and in most cases is triggered by a rapidly rising temperature.
- It affects children between the ages of six months and six years.
- For the vast majority of children with simple febrile convulsion, the outcome is excellent.

Although they appear like epileptic fits they rarely have anything in common with epilepsy.

What causes them?

- Caused by a rapid rise in the child's body temperature at the start of an illness.
- In about nine out of ten cases a viral infection is the most common cause of a high temperature.
- A child with a parent that had febrile convulsions is more likely to have a febrile convulsion.
- Children of parents with epilepsy are also in the higher risk category.
- Around six out of ten children who have had a febrile convulsion will never have another.
- However if a child has had one febrile convulsion it is likely he/she will have more.

What does a febrile convulsion look like?

When normal brain activity is disturbed a fit or seizure will usually happen and generally occurs without warning.

- During a seizure the child loses consciousness
- The head is thrown backwards, limbs become either floppy or stiff.
- The child may stop breathing for a very short period of time
- The child's body may jerk and the eyes could roll back.
- The skin may briefly turn pale or blue.
- It usually lasts no more than a few minutes.
- When the child regains consciousness, at first he/she may be irritable or confused, and will then sleep for several hours.

Types of febrile convulsion

Febrile convulsions (also referred to as fits or seizures) may present differently for different children. They may be described to you as:

- Simple febrile seizures: These are seizures which occur once, where both sides of the body jerk, and lass for less than 15 minutes. Simple febrile seizures do not generally recur within 24 hours, or during the same period of illness
- Complex febrile seizures: These may cause jerking to only one side of the body, they can sometimes last for more than 15 minutes and happen again during a 24 hour period, or during the same period of illness. It may also take a little bit longer to recover (get back to normal) following a complex febrile seizure.
- Febrile status or Prolonged febrile seizure: This is sometimes referred to as febrile status epilepticus but it does not mean that your child has epilepsy or is likely to develop epilepsy. It is a febrile seizure lasting longer than 30 minutes and is a rare complication of febrile seizures.

What to do when a child has a febrile convulsion

- Firstly and most importantly stay calm and take notice of how long the convulsion lasts.
- Hold the child in your arms and place him/her in a lying down position on a soft surface.
- Stay with the child and lay them on one side with the head level or slightly lower than the body. Remove any objects such as a dummy.
- Loosen any tight or warm clothing without restraining the child.
- Do not give the child anything to eat or drink during a convulsion.
- Do not slap or shake the child.
- Do not put the child in a cool bath.
- Once fully conscious and able to swallow try to give them Paracetamol (Calpol) or Ibuprofen as directed to help reduce the body temperature.

The child should be seen by a doctor as soon as possible after a convulsion for a check over to rule out serious illness.

Call a doctor or ambulance urgently if:

- A convulsion lasts more than 5 minutes.
- Another convulsion starts soon after the first one stops.
- The child has difficulty breathing.

Is treatment needed?

No treatment is usually needed for the convulsion itself if it stops within a few minutes.

However treatment may be needed for the infection causing the high temperature. Sometimes if convulsion lasts longer and a doctor may give medication to stop it.

Can I do anything to prevent febrile convulsions?

No. Constant worry about your child's temperature will only upset you and will not prevent convulsions. However it is common practice to keep a child cool when they have a feverish illness, this will make them more comfortable.

If a child appears hot, the following will help reduce their temperature:

- Nurse your child cool, i.e. in light clothes.
- Give medication to reduce a temperature e.g. Paracetamol and Ibuprofen. Ask the chemist or doctor for the correct dose and read the label on the bottle carefully.
- Give your child plenty of cool drinks.
- Some people use a fan to cool a child. This may not be a good idea if the fanned air is too
 cold. However a gentle flow of room temperature air may be helpful. Open the window or
 use fan on the other side of the room to keep air circulating.
- Do not "cold sponge" a child who has a high temperature. If it is too cold it narrows the blood vessels and reduces heat loss from the body. Many children also find cold sponging uncomfortable.

If you have any further questions please contact your child's consultant via their secretary via the hospital switchboard. The secretaries are available Monday to Friday 9.00 am to 5.00 pm

If you need to contact the Department outside of these hours please phone either:

Ward 3F: 0151 430 1616 Ward 4F: 0151 430 1791

> Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

