

FEBRILE SEIZURE (CONVULSION WITH FEVER)

What are Febrile Seizures?

Febrile convulsions are seizures triggered by high fever. They are the most common type of convulsion (occurring in 3-5% of children) and are generally harmless. The children are usually between 6 months and 6 years of age. It usually occurs with high fever at average of 40°C, but it can occur with any temperature when there is a sudden rise in temperature. The fever itself can be caused by an infection in any part of the body. Each febrile seizure usually lasts 1 to 10 minutes without any treatment.

Most of these children (60%) have just one febrile seizure in a lifetime. The other 40% have one to three recurrences over the next few years. Febrile seizures usually stop occurring by 5 or 6 years of age. **They do not cause any brain damage**, unless in exceptional cases where the seizure is unusually prolonged for more than half an hour. However, a few children (3%) will later have seizures without fever.

What can I do?

Reduce the fever

Bringing your child's fever down as quickly as possible will shorten the seizure. Remove your child's clothing and apply lukewarm washcloths to the face and neck. Sponge the rest of the body with tepid water. When the seizure is over and your child is awake, give him the usual dose of paracetamol or ibuprofen as prescribed. Encourage cool fluids.

Protect your child's airway

If your child has anything visible in his mouth, clear it with a finger to prevent choking. Place your child on his side or abdomen to help drain secretions. If your child vomits, help clear his mouth.

Emergencies

Call for medical attention if the febrile convulsion continues more than 10 minutes.

Common mistakes in First aid of convulsions

During the seizure, **don't try to restrain your child or stop the seizure movements**. Once started, the seizure will run its course no matter what you do.

DON'T TRY TO FORCE ANYTHING INTO YOUR CHILD'S MOUTH. This is unnecessary and can cut his mouth, injure a tooth, cause vomiting, or result in a serious bite of your finger. Any broken tooth, object or blood may also cause your child to choke. **Don't try to hold his tongue.** Although children may rarely bite the tongue during a convulsion, they can't "swallow the tongue".

Does my child need any long-term medications?

Anticonvulsants have side effects and febrile seizures are generally harmless. Therefore anticonvulsants are rarely prescribed unless your child has other neurological problems. Your physician will discuss this decision with you.

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When should I bring my child to the hospital?

- First episode of febrile seizures (generally, children with first febrile seizures are admitted for observation)
- The neck becomes stiff.
- Your child becomes confused or delirious.
- Your child becomes difficult to awaken (usually child is drowsy immediately after a seizure).
- Your child starts to act very sick.
- Your child has more than one seizure in a day
- Your child's seizure is prolonged (generally, get your child to hospital by the quickest route possible if the seizure is more than 10 minutes)

It is advisable that the child be brought for evaluation after each febrile seizure, even if there were previous episodes, so that a doctor can evaluate the exact cause of the fever.

Most parents whose children have had previous seizure episodes become confident in managing future episodes.