

If you are concerned please call 111 for advice, or in the case of an emergency dial 999.

If you have been given open access please contact Bergholt Ward or PAU.

More information can be found at www.nhs.uk/conditions/febrile-seizures/

Please ask if you need this leaflet in an alternative format.

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Febrile convulsions



Paediatric Emergency Department
Ipswich Hospital
Tel: 01473 702339

Paediatric Assessment Unit
Tel: 01473 702198

Bergholt Ward
Tel: 01473 702194 or 702195

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What is a febrile convulsion?

During a febrile convulsion the child becomes unconscious, usually stiff with jerking limbs. The child may appear a little blue around the lips.

Any illness that can cause a fever can cause one. Most occur with common illnesses such as ear infections, tonsillitis and flu. It often happens with the first temperature spike of an infection, and therefore can seem as though it's come out of the blue.

Seeing a febrile convulsion or seizure can be frightening, but the vast majority are not serious, and there is a full recovery afterwards. Most last a few seconds, and the majority stop by themselves before five minutes.

About five in 100 children will have one and they commonly occur between the age of 18 months and five years.

What should I do?

- Note the time the convulsion started.
- Make sure the environment is safe by removing or cushioning obstructions to protect the child's head from injury.

- Lay the child on their side with his or her head tilted slightly back. This will keep their airway clear and make sure they don't swallow any vomit.
- **Do not put anything in the child's mouth** or restrain them.
- If the convulsion has not stopped by **five minutes**, you should call an ambulance.
- It is usual for a child to be drowsy after a febrile convulsion.

Can they be prevented?

Most infections that cause febrile convulsions are caused by viruses so antibiotics are not useful.

There is little scientific evidence to prove keeping a child's temperature down can prevent a febrile convulsion. They are more likely to be caused by the chemical changes a body goes through after getting an infection that cause the fever, than the height of the temperature itself.

Medication such as paracetamol and ibuprofen do not treat the cause of fever, but they can be useful to alleviate the symptoms of fever such as lethargy, aches and distress.

Giving paracetamol and ibuprofen quickly will not necessarily stop a febrile convulsion from happening.

Will it happen again?

Approximately 40% of children who have one febrile convulsion are likely to have another. Once a child is over the age of three, the chances of having more than one seizure becomes less likely.

Will there be any permanent damage?

Febrile convulsions are not the same as epilepsy and do not usually require any further investigations. The usual outcome is full recovery with no after effects.

Will my child be admitted to hospital?

Children may be admitted if the seizure was long, or if there is concern about the infection that has caused the seizure.

Most children presenting with their first seizure have a blood test to check their blood sugar. We may also do blood or urine tests to assess for an infection.

