

# Febrile convulsions

An information guide



# Febrile convulsions

Seeing your child have a febrile convulsion can be very frightening.

This leaflet will explain what a febrile convulsion is, as well as the treatment your child may be given, both at home and hospital.

## What is a febrile convulsion?

A febrile convulsion (also called a fever fit or febrile seizure) is when a child has a fit that is caused by a fever (a raised temperature).

They are most likely to occur in preschool children, but most commonly between 12 months and 2 and a half years, and, though they are very frightening to watch, they are not harmful to the child and usually stop after a few minutes. A simple febrile convulsion is not epilepsy.

## What does a febrile convulsion look like?

The symptoms of a febrile convulsion can look very alarming.

Your child's body twitches or shakes, and they will lose consciousness. They won't look at you or react to your voice. They may foam at the mouth, vomit, or wet or soil themselves.

This episode usually only lasts a few minutes and your child may be very sleepy and sleep for up to an hour or two afterwards.

## **Why do they occur?**

Febrile convulsions can happen because of any illness that causes a high temperature, for example colds, flu, tonsillitis, or ear infections. However, it is unclear what triggers it, as most children with a high temperature do not go on to have a convulsion. Febrile convulsions can occur more than once. Each episode may have just one fit or a cluster of fits.

## **Can febrile convulsions be prevented?**

Keeping your child cool will make them feel more comfortable during a feverish illness but there is no evidence to prove that febrile convulsions can be prevented.

## **If my child has a convulsion at home what should I do?**

- Lay your child on a surface where he/she cannot hurt themselves (carpet, sofa, bed)
- Lay him or her on their side, with their face turned to the side, so that if there is anything in their mouth it can come out and they will not choke.
- Note the time if you can
- If your child twitches check whether one or both sides of their body move. If one side jerks more, tell the doctor and try to remember which side
- You do not need to do anything else
- Do not leave your child
- Do not force anything into their mouth
- Give your child lots of reassurance after a convulsion because they can feel very frightened and disorientated
- Once your child is fully alert you can give them paracetamol to help reduce their temperature, but check the instructions on the bottle.

The convulsion usually stops by itself within a few minutes. Telephone your GP afterwards.

## **When should I get further medical assistance?**

### **Call 999 if:**

- The convulsion lasts for more than five minutes
- The convulsion occurs without a temperature  
Your child has several convulsions in a short space of time, even if they each last less than 5 minutes
- Your child was not fully conscious before the convulsion or one hour after or does not improve quickly once a short convulsion is over
- Your child has difficulty breathing
- You suspect a serious illness is the cause of the fever, for example pneumonia or meningitis, or are concerned for any other reason.

### **What will happen in hospital?**

A nurse will take your child's temperature, measure their heart rate and breathing rate, and measure oxygen levels with an oximeter (a gadget that fits onto your child's finger or toe).

If your child has another convulsion when they are on the ward, the doctors and nurses will be there to help. If your child's breathing is affected, the nurses and doctors may give them some oxygen. They may also give your child some paracetamol or ibuprofen. This will make them more comfortable and lower their temperature after the febrile convulsion has stopped.

Your child will be monitored throughout his or her stay on the ward.

You should be able to take your child home once the doctors and nurses have decided it is safe to do so.

If your child has a febrile convulsion that lasts over 15 minutes or if the jerking is in only one part of the body, further tests may be needed. Your child may also need a medicine to help stop the convulsions. Your child's doctor will give you full information if these tests or medicines are required.

**Should a child who has had a febrile convulsion have immunisations?**

Yes but this should be discussed on an individual basis with the nurse or doctor giving the immunisation.

Seeing your child have a febrile convulsion is a very frightening experience. However, it is important to remember that for the majority of children these convulsions are harmless, stop after a few minutes and cause no permanent problems. Please call for medical advice if you are at all concerned.

**Contact details**

Children's ward at Royal Oldham Hospital is 0161 627 8866

Children's ward at North Manchester General Hospital is 0161 625 8273

## **Helpful telephone numbers**

NHS 111 – Emergency and urgent care services

You may wish to record other useful telephone numbers below:

GP -

Health visitor –

Community childrens nursing team -

BARDOC/ Go to doc services -

## References

Febrile convulsions, information for parents and carers, Guys and St Thomas's NHS Foundation Trust, 2012.

Febrile convulsions, BMJ Publishing Group, 2009.

Your guide to febrile seizures (a 'fit' with a temperature), Nottingham University Hospitals NHS Trust, 2012.

Febrile convulsions, information and advice for parents and carers, Sandwell and West Birmingham Hospitals NHS Trust, 2014.

Febrile seizure (Febrile convulsion), Patient.co.uk, 2013.

**If English is not your first language and you need help, please contact the Interpretation and Translation Service**

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