If a convulsion occurs:

- Move the child out of harms way to ensure they cannot fall off anything or injury themselves
- Do NOT put anything into their mouth
- Try to make a note of how long the seizure lasts
- Lie the child in the recovery position on the floor
- Do not wrap your child up
- Talk gently and reassuringly to your child; coming out of a seizure can be very disorientating and frightening for them
- Take your child to hospital, or call 999, especially if the child is very pale, turns blue or their fit lasts for more than five minutes.
- If your child has had a febrile convulsion before and the seizure lasts for less then five minutes with full recovery then you can seek advice from your GP or 111 out of normal surgery hours.

If you need this leaflet in another language, large print, Braille or audio version, please call 01923 217 187 or email westherts.pals@nhs.uk





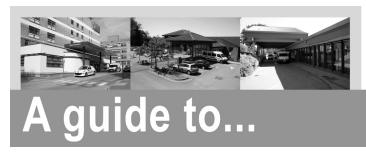




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Febrile Convulsion Patient Information

Children's Emergency Department (CED) Watford General Hospital



Caring for your child after their Febrile Convulsion

Your child has had a febrile convulsion.

We are happy that your child is well enough to be taken home under your supervision.

What is it?

Febrile convulsions are a type of fit / seizure that can happen when a child, usually between the ages of six months and five years, has a rapid increase in their body temperature.

One in 50 children will have had a febrile convulsion by the time they are five years old; therefore, it is a very common illness and one which children usually outgrown without any lasting effects.

Why do they happen?

The true reason is still not known, but we do know that they are more common if someone else in the family has had them before. Approximately one third of children will go on to have further febrile convulsions during their childhood.

A febrile convulsion can be very frightening for parents and/or caregivers to watch. However, they are NOT harmful to your child and do NOT cause brain damage.

What happens during a febrile convulsion?

The cells in the brain, known as neurons, communicate with each other using electrical impulses. A seizure occurs when the electrical impulses become disrupted. This can cause the brain and body to behave abnormally.

Most children will have what is known as a tonic clonic seizure where they will suddenly become stiff and lose consciousness. Both arms and legs may start jerking or twitching, their eyes may roll back and they may wet or soil themselves. After a fit it is normal for children to feel sleepy and be slightly confused.

Types of Febrile Seizure

There are two main types

Simple febrile seizure:

- Most common type accounting for nine out of 10 cases. A simple febrile seizure is one that:
- Is a tonic clonic seizure
- Does not last longer than 15 minutes
- Does not reoccur within 24 hours or during the period in which your child has an illness.

Complex febrile seizure:

- Less common, accounting for one in 10 cases. This is one where any of the follow features are present:
- Duration is longer than 15 minutes
- Your child only has symptoms in one part of their body this
 is known as partial or focal seizure
- Your child has another seizure within 24 hours of the first, or during the period in which they have an illness
- Your child does not fully recover from their seizure within one hour.

Can Febrile Convulsions be prevented?

Unfortunately there is NO way to prevent a febrile convulsion from occurring. Keeping your child cool in single layers of natural fabric will help them to feel better but won't stop a fit from occurring.

Does this mean my child has Epilepsy?

Absolutely NOT. Many parents worry that if their child has one or more febrile convulsions, they will develop epilepsy. Epilepsy is a condition where a person has repeated fits without fever. The risk of a child later developing epilepsy is very low.