Febrile Convulsion Advice Sheet

Advice intended for parents/ carers taking their child home after seeing a doctor





How is your child? (traffic light advice)



Self Care:

For practical advice refer to 'Fever advice sheet' - download via Healthier Together website: www.what0-18.nhs.uk

If your child has a fever and is distressed, you can give them paracetamol (calpol) or ibuprofen. However, remember this might not stop them having a further febrile convulsion and fever is a natural response to infection. Always follow instructions on the bottle and do not exceed daily maximum doses. Never give your child aspirin.

Tepid sponging is not recommended – it does not reduce fever and may cause your child discomfort.

Some useful phone numbers (You may want to add some numbers on here too)



For online advice: Healthier Together www.what0-18.nhs.uk (available 24 hrs/7 days a week)

www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

Febrile Convulsion Advice Sheet

Advice intended for parents/ carers taking their child home after seeing a doctor



We know that all parents/carers are extremely scared the first time that they see their child have a febrile convulsion (seizure). This information sheet is designed to provide you with some facts and practical advice.

Febrile Convulsions (febrile seizures)

- Occur in about 1 in 20 children, most commonly between 6 months 3 years of age.
- They often occur on the first day of a febrile illness. There appears to be no connection between the extent of the fever and convulsions, so they can occur even with mild fevers.
- Simple febrile convulsions generally last less than 5 minutes, involve the whole body becoming stiff then jerking of all 4 limbs (a tonic clonic seizure) and the child may be sleepy afterwards but should return to their normal self within a couple of hours.
- 1 in 3 children who have febrile convulsions may have further convulsions with febrile illnesses in the future.
- Regular treatment for prevention of future seizures is usually not necessary. Febrile convulsions are not epilepsy. There is a small risk of your child developing epilepsy in the future and many parents worry about this, however, most children who have childhood simple febrile convulsions grow out of them and do not develop epilepsy.
- If your child has had a simple febrile convulsion, has a clear cause for their fever and you and the medical team are happy, they may be cared for at home.

What to do if your child has another convulsion:

- Place them in the recovery position on their side, on a soft surface with their face turned to one side. This will stop them swallowing any vomit and keep their airway protected.
- Stay with your child and try to jot down what time their seizure starts and stops.
- Do not put anything in your child's mouth.
- If the seizure lasts longer than 5 minutes seek immediate medical help call 999 or go to the nearest A&E.



www.what0-18.nhs.uk