Febrile Seizure

A febrile seizure is a seizure that occurs in a child with normal development between 6 months and 6 years of age. They are common. Seizure is usually triggered by your child being sick and having a fever. Many children will have the seizure first and then develop the fever soon afterwards.

Some children will have a second febrile seizure. Fewer still will develop true epilepsy. True epilepsy is having seizures without a fever or other provoking factor. Febrile seizures are more likely to happen if a close relative has also had a febrile seizure.

DIAGNOSIS

Evaluation of the febrile seizure in a child more than 18 months old is usually limited if the child is back to normal after the seizure. If your child has more than three febrile seizures, then he may require further testing of the nervous system (*neurodiagnostic*) including neuroimaging and an electroencephalogram.

TREATMENT

Prevention

To prevent further seizures it is important to treat infections that cause fever by keeping the fever under 102° F (39°C). Treatment includes:

- Over the counter pain medicine for fever as directed, based on your child's weight or as instructed by your caregiver.
- Increasing oral fluid intake.
- Use of light clothing and bedding. Do not bundle your child up when they have a fever.
- Check your child's temperature and general condition frequently.

Seizure medicine is not usually needed to prevent or treat febrile seizures.

HOMECARE INSTRUCTIONS

During a seizure

- Place your child on his/her side to help drain secretions. If your child vomits, help to clear their mouth. Use a suction bulb if available. If your child's breathing becomes noisy, pull the jaw and chin forward.
- During the seizure, do not attempt to hold your child down or stop the seizure movements. Once started, the seizure will run its course no matter what you do. Do not try to force anything into your child's mouth. This is unnecessary and can cut his/her mouth, injure a tooth, cause vomiting, or result in a serious bite injury to your hand/finger. Do not attempt to hold your child's tongue. Although children may rarely bite the tongue during a convulsion, they cannot swallow the tongue.
- Call your local medical emergency services (911 in the U.S.) immediately if the seizure lasts longer than 5 minutes or as directed by your caregiver.

SEEK IMMEDIATE MEDICAL CARE IF YOUR CHILD DEVELOPS:

- More seizures.
- High fever.
- Headache.
- Confusion.
- Repeated vomiting.
- Excessively sleepy.
- Hallucinations.
- Breathing problems.
- Stiff Neck.

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