

Parent/Carer advice sheet

Febrile Convulsion

What are febrile convulsions?

Febrile convulsions (body/limb jerking with loss of consciousness) are related to feverish illness over 38°C, Febrile convulsions are understandably frightening for parents, but rarely cause harm and are common in children aged 1 to 5 years.

Febrile convulsions occur in about 1 in 30 children who have a fever, most commonly between 6 months – 3 years of age.

- They often occur on the first day of an illness with fever. There appears to be no connection between the extent of the fever and convulsions, so they can occur even with mild fevers
- Any illness which causes a temperature may do it, typically a cold or other viral infection
- Simple febrile convulsions generally last less than 5 minutes, involve the whole body becoming stiff then jerking of all 4 limbs. 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. The risk of having another reduces after the age of 3 years
- Regular treatment for prevention of future seizures is usually not necessary. Febrile convulsions are not epilepsy. 99 out of 100 children with febrile convulsions do not have convulsions after they reach school age or without a fever
- If your child has had a simple febrile convulsion, has a clear infection source that is causing their fever and you and the medical team are happy, they can be cared for at home

What happens during a febrile convulsion?

During a febrile convulsion, your child's body may become stiff, with associated loss of consciousness, and their arms and legs will twitch/ jerk (a convulsion). Febrile convulsions usually last less than 5 mins. Once it has stopped your child will usually become drowsy/sleepy and may be confused. It may take up to an hour for them to recover.

What to do if your child has a convulsion?

- Place them on their side, on a soft surface with their face turned to one side. This will stop them inhaling any vomit and keep their airway protected
- Stay with your child and try to take a note of what time their seizure starts and stops
- Do not put anything in your child's mouth, or attempt to slap or shake them out of it
- If the seizure lasts longer than 5 minutes seek immediate medical help – call [999](tel:999) or go to the nearest Emergency Department.
- If the seizure lasts less than 5 minutes – phone your GP or [NHS 111](tel:111) for advice if you are worried

The hospital may have given you medicine to insert into your child's mouth or bottom. If the convulsion carries on for more than 5 minutes (by the clock), give this medicine as stated on the label. This should stop the convulsion within 10 minutes. If it does not, bring them to hospital (dial [999](tel:999) if necessary, at this stage). In any event, let your doctor know what has happened.

Can febrile convulsions be prevented?

It is unclear if controlling a fever will prevent febrile convulsion, but widespread practice is to keep a child cool when they have a feverish illness, which will make them feel more comfortable. Invest in a good thermometer and check for a fever if they feel hot.

Ways to control a fever include: -

- Consider using either Paracetamol or ibuprofen in children with fever who are distressed.
- Remove your child's clothing down to a vest and pants.
- Frequent cool drinks.
- Use of electric fans to cool the air, but not directed straight onto your child.

Do not give your child a cool bath or tepid sponging as this brings the outer body temperature down quickly and can increase the inner body temperature.

When should I get help?

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



RED

If your child has any of the following:

- Has another seizure in the current illness lasting more than 5 minutes and/or does not recover rapidly afterwards
- Becomes extremely agitated, confused or very lethargic (difficult to wake)
- Becomes pale, mottled, and feels abnormally cold to touch
- Is going blue around the lips and/or has abnormal breathing
- Develops a rash that does not disappear with pressure (the '[Glass Test](#)')

You need urgent help.

Go to the nearest Hospital Emergency Department or phone [999](#)



AMBER

If your child has any of the following:

- Has another febrile convulsion (less than 5 minutes) in the current illness
- Remains drowsy or lethargic more than an hour after their seizure
- Has weakness of the arms or legs, visual difficulties (double vision) or difficulty speaking after the seizure has stopped
- Is moving one side of the body more than the other, or is stiff on one side compared with the other
- Seems dehydrated (sunken eyes, drowsy or no urine passed for 12 hours)
- Is becoming drowsy (excessively sleepy) or irritable (unable to settle them with toys, TV, food or picking up) – especially if they remain drowsy or irritable despite their fever coming down
- Continues to have a fever of 38.0°C or above for more than 5 days
- Seems to be getting worse or if you are worried

You need to contact a doctor or nurse today.

Please ring your GP surgery or call NHS 111 - dial [111 as your child should be seen by a medical professional](#)



GREEN

If none of the above features are present

Continue providing your child's care at home.

Self-care

Continue providing your child's care at home. If you are still concerned about your child, call NHS 111 – dial [111](#)

How can I help reduce healthcare associated infections?

Infection prevention and control is important to the well-being of our patients and for that reason we have infection prevention and control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming in to and after leaving the ward. In some situations, hands may need to be washed at the sink using soap and water rather than using the hand sanitiser as hand sanitisers are not suitable for use when dealing with patients who have symptoms of diarrhoea.

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Parent Advice Sheet

If you would like a copy of this information on audiotape, **in large print** or translated, please call the Patient Advice Liaison Service on 01296 316042 or email bht.pals@nhs.net

Legal Notice

Please remember that this leaflet is intended as general information only. We aim to make the information as up to date and accurate as possible, but please note that it is subject to change. Please therefore always check specific advice on any concerns you may have with your doctor

Approvals:
Paediatric Information and Guidelines Group – 13th July 2023
Paediatric Clinical Governance – 11th July 2023
CAP –