

Children's Services – Information for parents

Febrile convulsions ('fever fits')

What is a febrile convulsion?

- It is a type of fit brought on by a high temperature, usually during a cold, flu, or other illness.
- Febrile fits are not uncommon in children. About 1 in 30 children will have had a febrile fit by the age of five. It is less likely to happen after five years of age.
- During a febrile convulsion, a child becomes unconscious, and usually stiff, with jerking of the arms and legs. The child may also become a little blue around the lips.
- For those who see it happening, a convulsion can be very distressing, but the child is unconscious and unaware of the event.

What should you do?

- Lay the child on their side.
- Remove any objects/furniture out of the child's reach to avoid injury.
- It is not necessary to do anything else to the child during the fit. Do not try to restrain the child, or put anything into their mouth.
- Wait for the convulsion to stop. If possible, try to note the length of time the fit lasts, and the type of movements and sounds the child makes.
- It is normal for the child to be drowsy for a while after the fit.
- If the convulsion goes on for more than 10 minutes and your GP is unable to get to you immediately, take the child to hospital, calling 999 for an ambulance if necessary.
- Try to remove the cause of the convulsion, for example, their high temperature. You can do this by giving the child plenty of cool fluids to drink (where possible and if safe to do so, i.e. if the child is conscious); dressing them in loose, cool clothing; and giving them paracetamol or ibuprofen syrup (if safe to do so). Tepid sponging and fanning will also help, but do not plunge the child into cold water.
- Do not be tempted to wrap up the child in warm clothes or blankets, even if they say they are cold, or appear to be shaking from the cold.

Will it happen again?

Possibly: approximately four out of ten children who have had one febrile convulsion will have another one, although the risk reduces after the age of three years.

Will it lead to problems later in life?

Rarely: 99 out of 100 children who have a febrile convulsion will never have another after they reach school-age, and never have fits without a high temperature to trigger them.

Febrile convulsions are not the same as epilepsy and do not cause brain damage. Very rarely, a prolonged fit lasting for more than half an hour may cause a problem.

How can you reduce the chances of a convulsion happening again?

- If your child has a high temperature, try to reduce the fever using the methods previously described.
- Consult your GP if your child seems unwell – he may prescribe treatment with antibiotics if appropriate.
- Rarely, you may have been prescribed treatment from the hospital to help stop the fit if it happens again. Follow the instructions written on the packet.
- If you have any further questions, please do not hesitate to ask the nursing staff.

If you are at all concerned about your child please contact:

Ward:

Telephone: 01223.....

within 24 hours of discharge, or after 24 hours contact your GP.



We are currently working towards a smoke-free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS Stop Smoking helpline on 0800 169 0 169

Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or

patient.information@addenbrookes.nhs.uk



Document history

Authors	Children's Services
Department	Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number	01223 245151
Publish/Review date	June 2011/June 2014
File name	Febrile_convulsions.doc
Version number/Ref	2/PIN0306