Febrile Seizures

What Is It?

When a child has a seizure, they may have: stiffening of their arms or legs, short jerking movements of their muscles that cannot be controlled, smacking of their lips or strange tongue movements and rolling back of the eyes. Seizures almost always include loss of consciousness so your child may not be responsive.

A febrile seizure is when your child has a seizure when unwell with a fever. Febrile seizures usually only last a few minutes. Febrile seizures are quite common in healthy children between six months and six years old. Close to four per cent of all children will have at least one febrile seizure during their early childhood. These seizures can be quite frightening to families but rarely cause any harm to the child.

Key Points

- Febrile seizures are common in children between six months and 6 years old
- Febrile seizures are episodes of uncontrolled jerking or stiffening and loss of consciousness caused by fevers
- If your child is having a seizure, keep them safe. Do not try to put anything in their mouth. Call for help if the seizures lasts more than 3 minutes
- Most children recover well after a febrile seizure and do not require any special tests or admission to hospital
- Treating your child with fever medications will help keep them comfortable but will not necessarily prevent a febrile seizure

Seek Immediate Medical Attention if:

- Your child is less than 12 months with a febrile seizure
- Your child’s seizure does not stop after 3 minutes (call 911)
- Your child is not behaving normally 20-30 minutes after a seizure or is very difficult to wake up
- Your child has more than one seizure in 24 hours
- Your child has a seizure without a fever.
Symptoms
Seizures occur suddenly and usually without warning. You may see the following:

• Your child will be unresponsive
• Their eyes may roll back in their head, or to one side
• They may make grunting noises, have more saliva in their mouth or turn purple/blue around their lips
• Their arms and legs may go stiff or start shaking rhythmically

Treatment
What Should I Do if My Child has a Febrile Seizure?

1. Stay calm
2. Remove any nearby objects that are sharp or hard
3. If you can, roll your child gently onto their side. This prevents them from choking on mucus or vomit
4. Try and put something soft under your child’s head (ie: jacket or pillow)
5. Remove tight clothing, especially around the neck
6. Do not try to stop the seizure movements or attempt to put anything into your child’s mouth
7. Your child’s doctor will want to know how long the seizure lasted. If possible, note the time it begins (twitching of face, arms, legs) and ends (twitching stops, child may stare blankly and moan)
   o If the seizure is less than three minutes long, take your child to see a doctor right away
   o If the seizure has not stopped after three minutes, call an ambulance right away

What Will My Child be like After the Seizure?

• Sometimes children are confused or drowsy after a seizure and need to sleep for a while. Your child will let you know when they are ready to get up and resume normal activities.
• Be sure to wait until your child is alert before giving food, drinks or medicine by mouth.
What Will the Doctor Do When They See My Child?

When you see your doctor, they will ask you to describe the seizure in detail. They will want to know how long it lasted and how your child was moving during the seizure.

The doctor will examine your child to look for a cause for the fever and to make sure your child is acting normally. If there is a clear cause for your child’s fever (e.g.: cough and runny nose), the doctor will usually not order any extra tests. However, if your doctor feels there is something wrong, they will order some tests to rule out other possible causes of seizures.

Most children who look well after a short febrile seizure are safe to go home. A small number of children may need some tests or extra time to be observed in the emergency department before they are safe to go home.

How Can I Prevent Febrile Seizures?

It is hard to predict if and when your child will have a febrile seizure. This type of seizure usually happens as a child’s temperature begins to rise and often before the parents realize their child has a fever.

1. Fever medications
   - Treating your child with fever medication will NOT prevent a seizure or shorten it’s duration
   - You may give Acetaminophen (Tylenol ® or Tempra ®) or Ibuprofen (Advil ® or Motrin ®) to keep your child comfortable. Use as directed on the packaging or instructed by a health care provider.
   - Do not try and give your child fever medicines while they are having a seizure

2. Anti-seizure medication
   - Most children with febrile seizures are otherwise healthy and do not require any special seizure medications
   - There are some special circumstances where your doctor may feel your child will benefit from these medications. If this is the case, the child will usually be started on a short-acting anti-seizure medicine. Your doctor will explain how the medicine works and when you need to seek medical attention

Will My Child Continue to have Seizures in the Future?

About 30 per cent of children will have another febrile seizure. Most children ‘grow out’ of febrile seizures and less than two to three per cent of these kids will have a seizure disorder (epilepsy) later in life.
Do I have to be Extra Careful with My Child?

Remember that you have a normal, healthy child who may develop seizures in response to fevers. All children get sick once in a while, especially young children. Febrile seizures should not change your child's or family's life very much. Treat your child the same way as any other normal healthy child.

Do they Cause Brain Damage?

How a child looks during a febrile seizure can be quite frightening to families, however brief seizures cause no damage and no long-term changes to the brain.

Know Your Options

It can be scary when your child is sick. But in most cases, you don’t need to go to the emergency department. If you’re unsure, we're here to help.

Please Note

The content provided on these pages is not intended to replace medical advice. If you have concerns about the health of your child, contact your health care provider directly. If your child has an emergency, go to the nearest emergency department or call 911. Alberta Health Services and Project HEAL strive to ensure that all material is correct but will not be held liable for errors or incomplete information contained in these pages.