



**Doncaster and Bassetlaw
Teaching Hospitals**
NHS Foundation Trust

**Epilepsy:
What To Do When
Your Child Has a
Seizure**

CHILDREN'S SERVICES



Children with epilepsy tend to have recurrent seizures or fits. Having one seizure doesn't mean that a child has epilepsy; however the condition is more common than people realize and around 1 child in every 200 has epilepsy. Some children will grow out of it and others won't.

Seizures are caused by sudden bursts of electrical activity in the brain, which means that there is a temporary disruption in the way that messages are passed between brain cells. The brain is responsible for all the body's functions, therefore what happens during a seizure will depend on exactly where in the brain the seizure begins and how widely and quickly it spreads. For this reason there are lots of different types of seizure.

The most common type of seizure is known as a 'tonic-clonic' seizure. In children, other types of seizure include 'absence' seizure.

What happens during a seizure?

- A **tonic clonic seizure** happens in two stages; first, the muscles of the body contract, causing the child to become stiff. They may cry out and their breathing can become irregular.
- The second, clonic, stage happens when the limbs jerk, and this is caused by the muscles contracting and relaxing in quick succession. During this phase, the child may also bite their tongue and the inside of their cheeks.
- **It is not possible to stop the seizure.** After a minute or so, the muscles relax and the child will go limp. The child is unconscious during this time and will slowly regain consciousness. After this, they may seem confused or groggy and may not be able to remember anything at first.
- Children can also become incontinent of urine and faeces during the seizure and pass urine or open their bowels uncontrollably.
- Children can be left with a headache and aching limbs that can last for hours or even days.
- An **absence seizure** involves a child stopping their normal activity and appearing to stare into space as though they are daydreaming for around 10 to 15 seconds. They will not appear to hear anything and will have no memory of the seizure afterwards.
- Other types of seizure may involve a change in the child's behavior and confusion over 1 or 2 minutes.

What are the effects of a seizure?

Having a seizure itself will not cause your child harm, it won't cause any sort of brain damage or internal damage. Still, it can be alarming to see a child having a seizure and it helps to know what to do.

A child may injure themselves during a tonic-clonic seizure, for example by biting their tongue or inside of their cheek, or due to bumping into something in their immediate environment.

What to do if your child has a seizure

Step 1

Seeing your child have a seizure can be traumatic and upsetting for anyone, but it is very important that you remain calm and don't panic when your child has a seizure so that you can keep them as safe and as comfortable as possible by taking the following actions:

- Gently place your child on the floor or ground and remove any nearby objects.
- Put something soft or flat under the child's head if possible, such as a pillow or folded jacket/sweater
- Lay your child on his/her side to prevent choking on saliva
- If your child vomits, clear out the mouth gently with your finger
- Loosen any clothing around the head or neck
- Make sure your child is breathing ok
- Don't try to prevent your child from shaking – this will not stop the seizure and may make your child more uncomfortable
- Don't put anything in your child's mouth. Your child will not swallow his/her tongue, and forcing teeth apart could cause injuries or block the airway
- Don't give your child anything to eat or drink, and don't give any medicine by mouth until your child is completely awake and alert.
- Try to keep track of how long the seizure lasts. If someone is with you, ask them to also do this for you.
- **Stay calm** and stay with your child until he or she is awake and aware, and let your child rest after the seizure.

Step 2

If your child has prescribed medication from their doctor/consultant to treat their seizure, such as buccal midazolam, administer this as instructed and taught by your medical team (usually given at 5 minutes of seizure activity)

Get emergency medical care or call 999 if your child:

- Has a seizure lasting longer than 5 minutes or is having repeated or continuous seizures. **This includes if you have had to give prescribed treatment as per your child's care plan.**
- Has trouble breathing during or after the seizure (do not try to give your child mouth-to-mouth resuscitation **during** a seizure. If the child is not breathing after the seizure, first make sure 999 has been called and then commence CPR whilst waiting for the ambulance)
- Has a bluish colour of the lips, tongue or face
- Remains unconscious for longer than 10 minutes after the seizure has stopped.
- Falls and hits their head before or during a seizure
- Seems to be sick
- Has a seizure while in water
- Has any symptom that concerns you

Most of the time you do not need to call 999 or seek emergency medical care when your child has a seizure. However, you should contact the children's epilepsy team/children's ward if you have any concerns, questions or worries. They will be more than happy to help you and advice or direct you to the most appropriate professional.

(Please see back of leaflet for all contact numbers of your child's multi-disciplinary professionals and epilepsy services)

Step 3

Observe and report

- Try to remember as much as you can about the seizure to tell your child's doctor after. Keep a diary or log of events if necessary to take to your child's next appointment.
- Monitor or watch your child after the seizure due to the effects of a seizure. Give pain relief if necessary.

Step 4

Think Prevention

If your child has a known seizure condition, be sure that they get plenty of rest and take any prescribed seizure medication on time.

A main concern for parents is the chance that your child could have a seizure when you're not there. The first step is to learn what to do if your child has a seizure. The next is to teach others who may be with your child when you're not.