



Weill Cornell Medical College

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Patient Education:

Seizure, Pediatric

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Seizure, Pediatric

A seizure is abnormal electrical activity in the brain. Seizures can cause a change in attention or behavior. Seizures often involve uncontrollable shaking (*convulsions*). Seizures usually last from 30 seconds to 2 minutes.

CAUSES

The most common cause of seizures in children is fever. Other causes include:

- Birth trauma.
- Birth defects.
- Infection.
- Head injury.
- Developmental disorder.
- Low blood sugar.

Sometimes, the cause of a seizure is not known.

SYMPTOMS

Symptoms vary depending on the part of the brain that is involved. Right before a seizure, your child may have a warning sensation (*aura*) that a seizure is about to occur. An aura may include the following symptoms:

- Fear or anxiety.
- Nausea.
- Feeling like the room is spinning (*vertigo*).
- Vision changes, such as seeing flashing lights or spots.

Common symptoms during a seizure include:

- Convulsions.
- Drooling.
- Rapid eye movements.
- Grunting.
- Loss of bladder and bowel control.
- Bitter taste in the mouth.
- Staring.
- Unresponsiveness.

Some symptoms of a seizure may be easier to notice than others. Children who do not convulse during a seizure and instead stare into space may look like they are daydreaming rather than having a seizure. After a seizure, your child may feel confused and sleepy or have a headache. He or she may also have an injury resulting from convulsions during the seizure.

DIAGNOSIS

It is important to observe your child's seizure very carefully so that you can describe how it looked and how long it lasted. This will help the caregiver diagnosis your child's condition. Your child's caregiver will perform a physical exam and run some tests to determine the type and cause of the seizure. These tests may include:

- Blood tests.
- Imaging tests, such as computed tomography (CT) or magnetic resonance imaging (MRI).
- Electroencephalography. This test records the electrical activity in your child's brain.

TREATMENT

Treatment depends on the cause of the seizure. Most of the time, no treatment is necessary. Seizures usually stop on their own as a child's brain matures. In some cases, medicine may be given to prevent future seizures.

HOME CARE INSTRUCTIONS

- Keep all follow-up appointments as directed by your child's caregiver.
- Only give your child over-the-counter or prescription medicines as directed by your caregiver. **Do not** give aspirin to children.
- Give your child antibiotic medicine as directed. Make sure your child finishes it even if he or she starts to feel better.
- Check with your child's caregiver before giving your child any new medicines.
- Your child should not swim or take part in activities where it would be unsafe to have another seizure until the caregiver approves them.
- If your child has another seizure:
 - Lay your child on the ground to prevent a fall.
 - Put a cushion under your child's head.
 - Loosen any tight clothing around your child's neck.
 - Turn your child on his or her side. If vomiting occurs, this helps keep the airway clear.
 - Stay with your child until he or she recovers.
 - **Do not** hold your child down; holding your child tightly will not stop the seizure.
 - **Do not** put objects or fingers in your child's mouth.

SEEK MEDICAL CARE IF:

Your child who has only had one seizure has a second seizure.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your child with a seizure disorder (*epilepsy*) has a seizure that:
 - Lasts more than 5 minutes.
 - Causes any difficulty in breathing.
 - Caused your child to fall and injure the head.

- Your child has two seizures in a row, without time between them to fully recover.
- Your child has a seizure and does not wake up afterward.
- Your child has a seizure and has an altered mental status afterward.
- Your child develops a severe headache, a stiff neck, or an unusual rash.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your child's condition.
- Will get help right away if your child is not doing well or gets worse.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

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