

First fit

Information and advice for families

You have been given this leaflet because your child may have had a fit in the absence of a high temperature. It can also help answer some questions you may have.

What is a Seizure?

A fit, convulsion or seizure are terms meaning the same thing. Watching your child have a fit is a very frightening experience. You may even think that your child is dying. However, seizures are not as serious as they look.

Although electrical activity is normal in the brain, a seizure usually occurs because of an uncontrolled surge or discharge of activity.

There are different sorts of seizures. Some types of seizures cause the child to fall, become unconscious (so they are not able to respond to you) and there may be jerking of the limbs. Some seizures only affect part of the body and the child may remain conscious (a 'partial' seizure).

Is it Epilepsy?

A single seizure does not mean your child has epilepsy. About one in twenty people may have a seizure at some time in their life. It is thought that up to 50% of people do not go on to have any further episodes in the future.

There is usually no clear reason as to why a child has had a seizure, but if your child has more seizures they may need further investigation and/or treatment. Usually, for a first episode, investigations and follow up are not indicated. This is in keeping with our national UK guidelines.

Videotaping future episodes

A short 10 second video clip of an event frequently provides valuable information to the doctor trying to make a diagnosis. It saves trying to remember details during a stressful time. It might be useful ensuring all carers know how to quickly access the video function on their mobile phone in case of another event.



What do I do if it does happen again?

In case your child has a further episode, remember:

T R A F F I C

- **T TIME** - Time the event or write down the time it started and finished.
- **R RECOVERY** - Try to cushion the head. If you know how, placing your child into the recovery position is advised to keep the airway clear. Do not put anything in their mouth.
- **A AMBULANCE** - If the seizure carries on for more than **five** minutes, it is important to **call 999** and ask for an ambulance.
- **F FILM** - Although the last thing on your mind, film the episode if possible on a mobile phone or camcorder. This gathers vital information that will be helpful later. Aim to capture at least 10 seconds.
- **F FREE FROM DANGER** - Do not attempt to move your child unless there is a risk of danger and keep him/her free from restraint
- **I IMPROVEMENT** – Wait until your child is fully recovered or improved before allowing them to eat or drink
- **C CALM** – Although very difficult in the situation, try to remain as calm and relaxed as possible.

For further information, the following resource may be helpful:

Epilepsy Action
Helpline 0808 800 5050
www.epilepsy.org.uk

Royal United Hospitals Bath NHS Foundation Trust
Combe Park, Bath BA1 3NG
01225 428331 www.ruh.nhs.uk

Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format, or would like to feedback your experience of the hospital. Email ruh-tr.pals@nhs.net or telephone 01225 825656.