

CHILDREN
WITH

fever cramps



Children with fever cramps

General information:

Fever cramps are quite common among young children. 2-4% of all children aged 6 months to 4 years experience one or more cases of fever cramps.

Fever cramps are often caused by a sharp rise or fall in the child's temperature, or simply high fever. Fever cramps rarely occur after the age of five years. The reason why fever leads to cramps is unknown. It is generally believed that in the first few years of a child's life, its brain is more sensitive to fever. A rise in temperature usually means that the child has an infection. Fever cramps can be quite frightening, and parents can easily be shocked by the seizure. It comes quite unexpectedly, and the first time it happens parents are taken completely by surprise and often think that their child's life is in danger.

Luckily, fever cramps are harmless and do not result in brain damage, learning difficulties or epilepsy.

Symptoms:

Fever cramps may appear in many ways:

- The child becomes unconscious and stares – some children hold their breath during this phase. Then, rhythmic spasms occur in the arms and legs. Many children show the whites of their eyes. Froth may appear around the mouth, and the child urinates and pass stools.
- In other cases, the child only becomes unconscious and is weak without any spasms.
- For most children, fever cramps only last a few minutes. When the child starts to recover, the attack is over, but the child will usually be tired and confused, and often fall asleep.

Good advice:

- If your child runs a high fever, it must be cooled off. Let the child stay in a cooler place and dress it lightly, e.g. underwear and socks. Use a sheet or thin blanket instead of a duvet
- A child with a high temperature needs extra fluid often and in small portions

When to see a doctor?

- You should ALWAYS contact your general practitioner or the doctor on call if the child has fever cramps to determine why the child runs a fever
- The first time a child has fever cramps, it is often admitted urgently to hospital.
- If the child has fever cramps at a later point in time, it is not always necessary to be admitted to hospital, but the general practitioner or the doctor on call should examine the child.

Contact your general practitioner first because he/she knows your child better than the doctor on call. You can also get good advice and guidance from your health visitor.

Treatment:

- Try to stay calm
- In case of fever cramps, the child must have liquid stesolid administered in the rectum, which the doctor has prescribed in connection with a previous seizure
- Place the child on its side. When you have given the medicine, squeeze the child's buttocks together for two minutes to prevent the medicine from running out
- If the fever cramps have stopped before you have been able to give the child stesolid, it should not be given

- Stay with your child until the cramps have stopped
- Always contact your general practitioner or the doctor on call
- If the cramps have not stopped after five minutes, administer stesolid again, but only if agreed with a doctor
- If the cramps have not stopped 5-10 minutes after you have given the child stesolid, and the doctor has not yet arrived, call 112 to get the child to hospital
- When the seizure has passed, take the child's clothes off and let the child rest naked. If the child lies in a cool room, you may cover it with a duvet cover.

Childcare:

Since fever cramps are only a symptom of fever, the child can return to childcare as soon as the fever has gone and the child feels well again. It may be a good idea to keep medicine at the childcare facilities so that the staff can treat the child in case of fever cramps.



Parental guidelines

These guidelines have been prepared by a working group set up by the departments of paediatrics in Herning, Randers, Skejby and Viborg.

The intention with these guidelines is to provide parents with advice across the following sectors: health visitors, general practitioners family doctors, doctors on call, and the staff at paediatric admission wards in the Central Denmark Region.

The parental guidelines can be seen and downloaded from the internet on the web site www.fv.rm.dk

You may order additional copies from Rikke Dalsgaard,
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