



Seizure First-Aid/Precautions

How can I help my child during a seizure?

Caring for a child during a seizure can be frightening and stressful for parents, family members and other caregivers. However, in most cases, only a few simple steps are needed to ensure the safety and protection of a child during a seizure. Most seizures are self-limited, meaning they will stop on their own within a few minutes. Seizure first aid focuses on keeping a child safe during the seizure event. Review this information with anyone who cares for your child.

Seizure First Aid

- Never leave a child alone during a seizure.
- Pay attention to how long the seizure lasts. Use a watch and time the seizure. Most seizures will resolve in a few minutes. However, if a seizure is prolonged (usually more than 5 minutes), it may be necessary to call for help (911) or use rescue medicine. Your neurology provider will give you specific instructions on when to call for help or use rescue medicine.
- Stay calm! Although frightening to watch, seizures are usually not dangerous to the child and will resolve within a couple of minutes. If you can remain calm, it will reduce panic in others around you and help the child to feel less worried after the seizure.
- Prevent injury by moving sharp or dangerous objects away from the child. If the child is wandering or confused during the seizure, protect them from dangers such as open water, streets and intersections, or stairways and ledges.
- Make the child comfortable. Loosen any tight clothing around the neck or waist. If the person is standing, help them lie down in a safe area. To prevent head injury, place something soft under their head or gently support their head with your hands.
- Do **NOT** forcibly hold the child down, even if they seem confused or convulsive. This can lead to increased agitation, aggression or even injury during a seizure.
- Do **NOT** put anything in the child's mouth! This increases the risk of choking or injuring the mouth. Don't worry; the child will not swallow their tongue.
- Make sure the child's breathing is okay. Lay the child on their side, with their mouth pointed to the ground. This prevents inhalation of saliva or vomit and helps open the airway. Because of muscle contractions in the chest and diaphragm, the child may have irregular or shallow breathing or even appear to stop breathing during the seizure. Breathing will return to normal once this part of the seizure ends. CPR or "mouth-to-mouth" rescue breathing is rarely necessary during a seizure.
- Do **NOT** give any water, pills or food until the child has fully regained consciousness.
- Treat the child in a sensitive and caring manner and encourage others to do the same. The child may feel embarrassed or confused about the seizure. Explain what happened in a very simple way once they are alert and able to understand.



When should I call for medical assistance (911)?

The decision to call for help during a seizure will depend on the frequency and type of your child's seizures. Your neurology provider will provide you with precise guidelines. In general, it may be necessary to call for help if your child's seizure is lasting longer than usual, if they are having multiple seizures in a short period or if rescue medicines are not stopping the seizures. If you aren't sure what to do, it is ALWAYS okay to call for help. Call for help if:

- The seizure lasts longer than 5 minutes.
- Seizures are occurring closer together than is usual for your child.
- Your child is having "back-to-back" seizures without waking up in between.
- Breathing becomes difficult, or the child appears to be choking.
- The seizure occurs in water.
- There is concern for injury to the head or body during the seizure.
- Rescue medications are not stopping or controlling the seizures.

Seizure Precautions

In general, children with seizures can participate in most activities, including contact sports. However, your neurology provider may restrict certain physical, athletic or recreational activities if your child's seizures are not well-controlled. If you are unsure about a certain activity, ask your provider. Below are some general safety and prevention guidelines for children with seizures:

- **Keep a regular sleep schedule.** Sleep deprivation is a common trigger for seizures.
- **Take anti-epileptic medications consistently, as prescribed.**
- **Children are at increased risk of seizures during periods of illness or fever.** Visit your pediatrician promptly if your child is ill and treat fever promptly with medication.
- **Encourage physical activity.** Limit activity only if a seizure during the activity would pose a special risk. Helmets should always be worn while riding bicycles, horses and skateboards.
- **Know the driving laws!** Every state has restrictions on driving with seizures. In most cases, seizures must be controlled for at least six months before driving is allowed.
- **Practice water safety.** A person is at high risk of drowning if they have a seizure in the water. A child with seizures should never bathe in a tub, swim or play around water without direct adult supervision. Use life jackets with any water recreation.
- **Avoid heights.** Due to the risk of falls, children with seizures should not be allowed to climb or play on unprotected structures such as trees, ledges or boulders. As a general rule, do not allow the child to climb higher than their own height. A safety harness may be needed for certain recreational activities.
- **Safety-proof your home.** If your child is prone to collapsing or falling during a seizure, make sure sharp edges and dangerous objects (such as stoves, fireplaces and glass furniture) are covered, blocked off or removed from the home.
- **Avoid using power tools,** such as drills or saws, or other sharp or dangerous objects if seizures are not well controlled. Always use tools and power equipment with appropriate safety guards and automatic stop switches.

References and Resources:

- epilepsy.com/recognition
- epilepsy.com/preparedness-safety/staying-safe