

Your baby is being discharged to home after being diagnosed with seizures. Seizures in babies may look different than seizures in older children and adults. When an infant experiences a seizure, the features can vary from subtle to more dramatic. Seizures can involve subtle movements of the eyes, mouth, breathing, and the arms and legs. Infants may also have seizures with movements that are more pronounced. "Grand-mal" seizures are common in adults but are rare in babies. Focal (one location) seizures involve one part of the body. Multifocal or generalized (more than one location) seizures involve several parts of the body at the same time. Multifocal seizures may travel from one part of the body to another during the seizure.

## Things that you may see:

- *Clonic* seizures are jerking movement of one or more arms and legs that you cannot stop with gentle holding. They are characterized by rhythmic, repetitive shaking of parts of the body.
- *Tonic* seizures involve stiffening of parts of the body and can be focal or generalized.
- *Myoclonic* seizures represent very brief isolated jerks of parts of the body.

Sometimes seizures involve subtle movements that happen many times in a row. Eyes may blink, flick to the side, stare, or roll up or back into the head. There can be smacking the lips, sucking motion, or tongue thrusting. Sometimes there are pauses in breathing. The arms and legs may have bicycling or swimming movements.

During a seizure, you may see a combination of the things listed above. Your baby may also do things during a seizure that are not listed here and are unique to your baby. Seizures are usually brief, lasting a few seconds to 1-2 minutes. You should not do anything to your baby during a seizure other than to keep your baby safe from being hurt or falling. It is okay to hold your baby during a seizure. If your baby spits or vomits during a seizure hold or place your baby on his/her side to help keep the airway clear.

Often after a seizure, your baby will become less alert and even sleepy for a while. This is the "post-ictal" part of a seizure. During this time, you may see your baby breathe very evenly and deeply. This is common after a seizure. The length of this post –ictal period varies.

Your baby is receiving medication to control your baby's seizure activity. These medications may cause drowsiness. Once a day medications should be given in the evening before your baby will sleep during the night. This will prevent the medication from interfering with your baby's alert times during the day.

You do not have to restrict your baby's activities. Provide your baby with stimulation and "tummy time" during awake periods.

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## You should keep track of:

- how often your baby is having seizures
- how long the seizure lasts
- what your baby's seizures look like

## You should call your pediatric care provider if your baby:

- demonstrates seizure activity
- becomes very sleepy and won't waken easily
- becomes irritable and cannot be calmed
- begins to feed poorly
- for anything that you think is unusual about your baby's behavior

Program your pediatrician's and neurologist's phone number into your phone and post in prominent place in your home.

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