

## **CHARACTERISTICS OF FEBRILE SEIZURES IN CHILDREN.**

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**Purpose of the study:** to study the nature of febrile seizures in children.

**Research materials and methods:** The study group included 26 children with simple febrile seizures, the second group - 24 children with afebrile seizures that developed after an episode of fibril seizures. All children underwent targeted clinical, neurological, laboratory and instrumental examinations.

**Results:** for a group of children with febrile seizures it was typical: the first onset of seizures was noted after 1 year, the cause of the development of seizures was hyperthermia, which was caused by a viral infection of the upper respiratory tract, exacerbation of chronic tonsillitis, intestinal infections, the seizure was generalized clonic-tonic in 80% ( 21 children), more typical for older children, and generalized clonic seizures (GKP) in 19% (5 children), more typical for young children, the duration of convulsive paroxysm was up to 5-10 minutes.

It should be noted that there was no visible difference in the behavior of children after simple febrile seizures; moodiness and tearfulness were more associated with somatic illness, especially patients hospitalized in somatic departments. No organic signs were observed in children with FS. One of the manifestations was dysfunction of the ANS, which manifested itself as hyperhidrosis of the palms and feet, marbling of the skin.

**Conclusions:** Febrile convulsions are accompanied by hyperthermia against the background of a somatic illness, are short-lived, and are not accompanied by organic symptoms.