

MANAGEMENT OF CONVULSIONS

For Convulsing child at all health facilities -

Sl. No	Name of Drugs	Doses	Available as	Route of Administration	Indication	Limitation /side effects / benefit
1	Diazepam	0.1-0.3mg/kg	10mg/2ml	IV Slowly	Uncontrolled convulsions	May cause respiratory arrest in newborns & infants. short acting
2	Midazolam	0.2 mg/kg	1mg/ml in 5ml & 10 ml vials Intra nasal spray	IV/IM, Intra Nasal, Sublingual	Uncontrolled convulsion	Short acting
3	Lorazepam	0.05-0.1 mg/kg	2mg/ml	IV Slowly	Uncontrolled convulsion (Safe in infants)	Tachycardia, Depression, Confusion, Blurred vision
4	Phenytoin Sodium	15-20 mg/kg	100mg/2ml amp.	IV Slowly after dilution in normal saline	Convulsion in all age groups	Good drug for control of seizure & as maintenance
5	Phenobarbitone	20mg/kg as loading dose (upto total 40mg/kg in increment of 10mg/kg)	200mg/ml ampule	IV slowly after dilution in normal saline	Convulsion in infants can be used in all age groups	Good drug controlling seizure & long term use.
6	Sod. Valporate	20-40mg/kg	100mg/1ml 400mg/4ml 1000mg/10ml Amp.	IV slowly after dilution in normal saline	All age group	Good for control & as maintenance

Note: After the control of convulsions by either Diazepam or Lorazepam or Midazolam, loading dose of Phenytoin Sodium should be given to prevent recurrence of seizures in the next 24 to 48 hours till the maintenance dose of drugs are given.

Maintenance Dose :

Phenobarbitone	3-5 mg/kg/day (Q-12 Hrs.)	IV or oral
Phenyton Sodium	5-8 mg/kg/day (Q-12 to 24 Hrs.)	IV or oral
Sodium Valporate	20-60 mg/kg/day (Q-8 to 12 Hrs.)	Oral

- Total duration of anti convulsants to be decided by treating doctors as per the assessment of individuals cases.

जीवन्त बिहार... सपना हो सकार



राज्य स्वास्थ्य समिति, बिहार



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