

Eclamptic Seizures

1	<ul style="list-style-type: none"> Dial 2222 state OBSTETRIC EMERGENCY If still pregnant state NEONATAL EMERGENCY
2	Administer high flow oxygen and maintain airway
3	Place in the left lateral position
4	IV access Send FBC, U&E, LFTs, INR, G&S
5	Continuous BP and oxygen saturation monitoring
6	Commence Magnesium immediately (see below for dose)
7	Commence Labetalol as necessary
8	Fetal monitoring and delivery planning

**AVOID
BENZODIAZEPINES**

Seizures in a pregnant woman is eclampsia until proven otherwise.

Remember pregnant women with epilepsy can have eclampsia.

Loading Dose	Maintenance Dose	If Further Seizures
4 g MgSO₄ (8 mL of 50% solution)	10 g MgSO₄ (20 mL)	Give a further 2 g MgSO₄ (4 mL) IV over 5 mins
Mixed with 12 mL N.Saline/5% Dextrose for injection	Mixed with 30 mL water for injection to total volume 50 mL	
IV over 5 mins	Infusion to run at a rate of 1 g/hour (5 mL/hour)	