

محتوای زیر، مقاله ویراستاری زبانی شده در مجموعه مدیتورها می باشد.

## Discussion

Febrile seizure, also called as febrile convulsion, is one of the most frequently occurring seizure disorders in children, and most often occurs in children between the ages of 6 months and 5 years. It is characterized by a temperature rise of 38 °C or higher, and factors such as central nervous system infection, metabolic disorders and past history of seizures must be eliminated to effectively diagnose this disorder (1,2). Additionally, other important factors like genetic status, nutritional geography, associated infections, metabolic status, history of head trauma, and serum levels of some minerals are known to contribute to seizures, but no specific pattern of how they are involved has yet been developed; serum iron levels are one of these items on which there is much disagreement (4). Iron is an important micronutrient used by almost every cell in the human body. It is well understood that iron is a cofactor for many enzymes in the body and plays an important role in the production of neurotransmitters and their function, as well as hormonal function and DNA transcription(6). Serum ferritin is the best single test for iron deficiency. Ferritin levels are related to the body's total iron stores and are useful in its assessment. Intracellular calcium also regulates many essential neuronal activities, such as the release of neurotransmitters, neuronal excitability, and synaptic transmission(8).

According to the results premised on the findings of the present study, serum calcium and ferritin levels did not show a significant difference between either the case or the control group. Moreover, factors like age, sex, past medical and family history of seizures also had no significant effect on febrile seizures. In the present study, the amount of ferritin was found to be lower in the case group,

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Or indicative of ....

Commented [94]: The patients of case group did not differ significant from the control group in terms of ferritin and calcium serum levels.

however, this relationship was not significant, which is probably due to the heterogeneity of the number of samples in the two groups of case and control.