

SYNCOPE DISCHARGE ADVICE (INCLUDING A GUIDE TO FALLS CLINIC)

PATIENT INFORMATION LEAFLET

What is Syncope?

Syncope, commonly known as fainting, refers to a sudden loss of consciousness, followed by a rapid and complete recovery. If you have symptoms of dizziness or lightheadedness, without loss of consciousness, this is called presyncope.

Syncope is surprisingly common. About one-third of people have a syncopal episode at some point in their life.

What causes syncope (fainting)?

In order to function properly, the brain relies on oxygen that is carried in the blood. Fainting occurs when there is an interruption to the brain's blood supply. In most cases, syncope is not a sign of a life threatening problem, although some people with syncope have a serious underlying medical condition. In non-elderly people, over 75% of cases of syncope are not associated with an underlying medical problem.

It is important to determine the cause of syncope so that it can be prevented or treated in the future. The doctor that has seen you in the Emergency Department today is happy that you are safe to be discharged home. However, a referral to the Falls Clinic has been made for you. Please complete the questionnaire you have been given with this leaflet and take it with you to the clinic.

What will happen when you attend the Falls Clinic?

At the clinic we see patients of all ages with falls, dizziness or collapse. We also look at balance abnormalities, checking blood pressure and heart rate reflexes.

If this is your first visit you will be assessed by one of the doctors in the clinic and a history of your problem taken. Following this a decision will be made in consultation with yourself about which investigations you need. It may be that a simple medical check is all that is required to make a diagnosis. However, it is possible that you may need some tests.

Some tests you may need:

There are 4 main tests that may be carried out on your visit.

1. Head Up Tilt Test:

This test involves 4 wires placed on both arms and legs, which record your heart rate and a small cuff around the finger, which measures your blood pressure. You will be placed on a mechanical bed, which will move you into a standing position where your feet would rest on a footplate and your hands would rest on the table in front of you. This test will last approximately 20-40 minutes. During the test a spray may be administered under your tongue. The spray can detect any tendency to fainting you may have.

2. Carotid massage:

This test also involves 4 wires placed on both arms and legs, which record your heart rate and a small cuff around the finger, which measures your blood pressure. The left side of your neck will be rubbed for 5 seconds to assess the body's response.

3. Postural Blood Pressure Measurement

For this test we simply use a blood pressure cuff around your finger. You will rest for 5 to 10 minutes and then we will stand you up and watch your blood pressure response to standing.

4. Autonomic Function Tests

These tests involve assessing various reflexes controlling blood pressure and heart rate, including breathing in and out, placing your hand in cold water and standing.

It is possible you may have none of these tests or have all of them.

During your consultation at the clinic a decision with regard to the tests you need will be made and discussed with you.

Please Note:

• Anyone with an unexplained cause of loss of consciousness **should not drive** until they have been reviewed by a specialist.

General advice with regard to falls and dizziness:

- Blood pressure can be low in the mornings and this causes dizziness on getting out of bed or standing. Always sit for 1 or 2 minutes and exercise your calves by moving your feet up and down also squeeze your hands in and out for 2 or 3 minutes before standing in the mornings or getting out of a chair.
- If you suffer from dizziness, which feels like a near blackout, the quickest way to resolve these symptoms is to lie down flat with your legs raised.
- Keep up a good intake of fluids.

When should I return to the Emergency Department?

It is important that you return to the Emergency Department for assessment if you experience collapse or syncope (fainting) associated with any of the following:

- Exertion or effort.
- Headache, chest pain, palpitations or shortness of breath.

Useful websites

www.nhs.uk www.chsft.nhs.uk

Contact details

This information was correct at the time of printing. While the Trust makes every reasonable effort to keep its information leaflets up to date, very recent changes may not yet be reflected in the guidance and you should discuss this with the clinical staff at the time of your appointment.

Information is based on that available on www.patient.co.uk.

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