

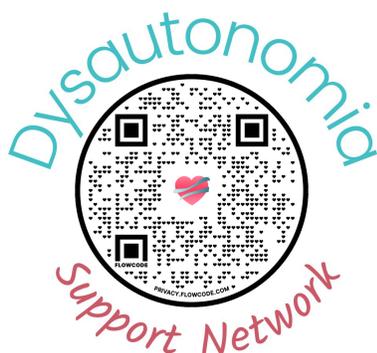
VASOVAGAL SYNCOPE

What is Vasovagal Syncope?

Vasovagal syncope (VVS), otherwise known as **neurally mediated syncope** (NMS), is a form of syncope where the autonomic nervous system suddenly fails to maintain an adequate vascular tone resulting in hypotension (low blood pressure) and bradycardia (low heart rate) causing temporary loss of consciousness.¹ Orthostatic stress is typically the main trigger for a vasovagal syncope episode.²

Syncope, or **fainting/passing out**, is a common problem that can result from many different causes. It presents as a temporary loss of consciousness with the inability to maintain postural tone.¹

Some individuals are not able to determine the exact cause of their syncope, and many only have one episode in their entire life. Other individuals can have recurrent episodes of passing out, commonly caused by reflex syncope such as vasovagal syncope or cardiac syncope.¹



For references, please scan the QR code. (C)2022

Incidence/Prevalence

Up to **40% of people faint** at least one time in their life.^{1,3} Females faint more frequently than males.¹ About **14% of all syncopal episodes are vasovagal** in nature.²

Symptoms

Syncope can be accompanied by a period where the individual experiences symptoms known as **presyncope** prior to losing consciousness.

Pre-syncope symptoms may include:^{1,3}

- Feelings of warmth
- Claminess
- Sweating
- Flushing
- Nausea
- Graying of vision or vision loss
- Changes in hearing
- Pallor (looking pale)

Usually while unconscious, the individual is motionless, however, fine and coarse myoclonic movements, such as tremors or jerking, have been seen in around 10% of cases.^{3,4} **Unconsciousness typically only lasts 1-2 minutes** but full recovery can be slow and take minutes to hours.³ After the syncopal event, the individual experiences intense fatigue.^{1,3}



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Diagnosis

Diagnostic Criteria:³

1. The syncopal episode is triggered by
 - o Standing for more than 30 seconds,
 - o Pain,
 - o Emotional distress, or
 - o Other noxious stimuli.
2. There is a **drop in blood pressure and heart rate**.
3. Symptoms like sweating, warmth, and nausea are experienced.
4. There is **fatigue** following the episode.

The following diagnostic tests may be useful when vasovagal syncope is suspected:

- Resting 12 lead ECG¹
- Tilt table testing³
- Holter monitor¹
- Cardiac stress test if syncope occurs during exertion¹

Treatment¹

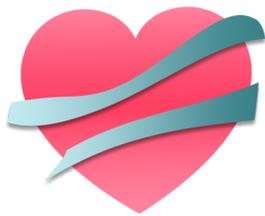
Treatment for vasovagal syncope typically starts with education on the diagnosis and prognosis.

Education should focus on **avoidance of triggers** like **prolonged standing, warm environments,** etc.

Physical counterpressure maneuvers can be helpful for presyncopal episodes to avoid loss of consciousness.

An **increase in salt and fluid** intake may be helpful in managing symptoms.

If the syncope continues, **medications** may be required. Midodrine, fludrocortisone, beta blockers, and/or selective serotonin reuptake inhibitors (SSRIs) may be helpful.



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