

November: Diagnostic tests

Q: I am 22 years old and over the past six months I have fainted four times. No one seems to understand what the problem is so the hospital has fitted me with a seven day monitor to see if they can find out what happens to my heart when I pass out.

I don't faint every week so if I don't faint while I'm wearing the monitor how can they determine whether my fainting is related to heart rhythm problems?



A: You are having quite frequent syncope but have not stated when you first fainted. You also say nothing about your general health or whether there are any members of your family with heart disease or have died suddenly. This is not a criticism but these are questions I would ask you if we were having a consultation. STARS has a patient questionnaire called The Fainting Checklist which patients can complete before going to see a primary health provider or specialist. I recommend that you download this on the STARS website, complete and take with you to your next appointment.

The great probability is that you are experiencing Vasovagal Syncope. Vasovagal Syncope is not life threatening but can be very unpleasant and worrying for a patient and their family until a diagnosis has been made and treatment begun. The diagnosis in a young person, such as you, is very often made by letting you talk about your fainting episodes, your response to a few questions plus a description of what happens during an attack by a witness. In unusual cases, a tilt test or an insertable cardiac monitor to monitor the electrical activity of the heart may be necessary to be sure about the diagnosis.

If you are diagnosed with Vasovagal Syncope it can be managed by making changes to your lifestyle:

1. Reassurance and advice should be offered about Vasovagal Syncope.
2. Depending on the trigger of your Syncope you may be advised to drink more water, eat more salt, drink less caffeinated drinks and pay attention to likely circumstances when an attack could happen and as far as possible avoid the circumstances.
3. Third, when you start to feel dizzy before an attack you can link your fingers and pull them apart very energetically without letting go. This is called isometric exercise as opposed to dynamic exercise such as running or walking. Isometric exercise raises the blood pressure greatly and at this time your blood pressure is going down. This activity at this time has become known as a counter-pressure manoeuvre and is very effective.

I mentioned at the beginning that I know little about you. If you suffer from heart disease there is a likelihood that your attacks are related and if you have lost a close member of family suddenly you may have inherited an abnormality, which could predispose you to something similar. In either case, further investigations are required. May I stress that these things are very rare while fainting is common.

Lastly, you ask the common sense question about heart rhythm monitors. When attacks occur every few months they are not going to be diagnosed by a heart rhythm monitor without a great deal of luck. It is recommended that if attacks occur less frequently, an insertable cardiac monitor should be used to monitor heart rhythms for months at a time, or the provocation of a fainting episode through a tilt table test.

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