

POTS UK

POSTURAL TACHYCARDIA SYNDROME



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WHAT IS PoTS?

Postural Tachycardia Syndrome (PoTS) is an abnormal response by the autonomic (involuntary) nervous system to becoming upright. There is an abnormally high increase in heart rate and altered blood supply to the brain.

Associated with this increase in heart rate, people with PoTS must also experience symptoms of orthostatic intolerance (the development of symptoms on upright posture which are relieved by lying down) which may include:

- Headaches
- Dizziness or lightheadedness
- Fainting or near fainting
- Tiredness/Fatigue
- Palpitations (an awareness of the heart pounding)
- Poor concentration
- Sweating
- Gut problems

Symptoms can worsen with prolonged standing or sitting, heat, certain foods, alcohol, exercise, dehydration, prolonged bed rest.

DIAGNOSING PoTS

In addition to detailed questioning, the "Stand Test" can aid diagnosis and can be carried out in the GP surgery. The pulse rate and blood pressure should be measured when lying down, then after 2, 5 and 10 minutes of standing still. Within this time, patients should experience an increase in heart rate of 30 beats per minute or more (40 in teenagers). Blood pressure may stay the same, rise or fall. This test may bring on symptoms of PoTS and some people may faint.

Acrocyanosis (puffiness and purplish discolouration of feet/hands) might be seen.

Sometimes a Tilt Table Test is performed. Other tests may be necessary to rule out conditions with symptoms similar to PoTS.

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CAUSES OF PoTS

Causes of PoTS include viral illnesses, joint hypermobility syndrome and diabetes. Sometimes, no cause can be found. PoTS may overlap with other disorders such as vasovagal syncope and Chronic Fatigue Syndrome.

TREATMENTS

Once it is recognised, many patients with PoTS gain benefit from changes in lifestyle and medication if required. This eases many of the disabling symptoms. The majority of patients will respond to treatment but some patients may have problems over the years.

High fluid intake of 2-3 litres per day is usually recommended. Some patients are asked to increase salt intake. Gentle exercise and small frequent meals, wearing strong support tights and elevating the head end of the bed may help. Avoid anything that triggers symptoms.

If these measures do not control symptoms, medicines may be used eg fludrocortisone, midodrine, desmopressin, beta blockers, some antidepressants and octreotide.

WHAT TO DO IF YOU SUSPECT PoTS?

If you suspect PoTS, consider discussing this leaflet with your doctor. Referral is needed to a specialist with an interest in PoTS, usually a cardiologist or neurologist- see "Doctors List" on the PoTS UK website for guidance.

WHO ARE WE?

PoTS UK is a small charity run mostly by patients with a medical background. We support and inform patients and their family and friends through the website, newsletter and Facebook page.

We raise awareness within the medical community about this under-recognised and misdiagnosed condition.

We aim to offer hope that life can be lived and enjoyed despite living with a debilitating and life altering condition.