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How to Care for Your Child with a Fainting Episode (Vasovagal Syncope)

This leaflet will provide you with information about a fainting episode.

What is Fainting?

- Fainting (also known as Syncope) is a temporary and sudden loss of consciousness with loss of body strength, followed by complete recovery in a few minutes.
- Fainting happens when the blood flow to the brain slows down for a short period. When a person faints, they usually fall over or lie down; this makes it easier for the heart to pump more blood to the brain than standing.
- Fainting in children is quite common; up to one in five children experience at least one episode before 15 years. These episodes can be caused by:
    - Dehydration,
    - Sitting for a long time
    - Standing for a long time
    - Fear
    - Hot environment
    - Sight of blood
    - Stressful situations
    - Hot shower.

How Is Vasovagal Syncope treated?

- Treatment of fainting or syncopal attack depends on the underlying cause.
- Most of the time, simple actions at home can be enough
- Your doctor will advise you if your child needs any further treatment

Prevention

To prevent syncopal episodes, the following actions can be useful.
o Encourage your child to drink plenty of fluids to avoid dehydration.
o Add adequate amounts of salt to the meals.
o Encourage your child to eat three meals a day, especially breakfast.
o Encourage your child to Wear compression socks.

If your child experiences the warning signs, they should immediately take the following actions to avoid loss of consciousness and fall:

- Lie down flat with the legs raised (on a chair or against a wall).
- Sit down as soon as the warning signs occur.
- If your child is in a public place and unable to lie or sit down, they can squat down until they feel better.
- When feeling better, advise them to get up carefully.
- If signs return, they should continue the sitting/lying/squatting position.

When should I seek medical advice?

Seek medical advice if:

- Your child experiences fainting with loss of consciousness for the first time so that the doctor can assess them and give you a plan.

Go to the Emergency Department or call 999 if your child:
- Faints /loss of consciousness without any warning symptoms
- experiences a lengthy period of loss of consciousness (more than five minutes)
- Faints during physical exertion or sporting activities
- Experience's chest pain
- Experiences Palpitations- a feeling that your child's heart beats faster, skips beats or have extra heartbeats.
- Have a history of heart disease
- Have a history of sudden unexplained death or sudden death due to heart condition in family members less than 40 years of age.
- Have a History of a family member with a pacemaker.

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What is a Vasovagal Syncope?

- The most common type of fainting in children is Vasovagal Syncope, caused by a reflex of the nerves that causes either sudden widening of the blood vessels in the legs or a slowing of the heart rate, or both.
- Vasovagal Syncope generally tends to be harmless.
- Rarely, syncopal episodes could be because of heart problems, anaemia or low blood sugar.

What are the signs and symptoms of Vasovagal Syncope?

Before fainting, a child may experience some warning signs such as:

- Dizziness,
- Problems with eyesight,
- Voices sounding far or muffled,
- Feel nauseous.
- The child may also look very pale during the fainting episode.

If your child does not lie down immediately when these signs happen, he/she lose consciousness (faints) and fall over. Your child will often recover fully within a few minutes.

How Is Vasovagal Syncope diagnosed?

- The doctor will ask a few questions about your child's health and examine your child.
- Your doctor will decide if more testing or blood tests are needed. Sometimes an electrocardiogram (ECG) or blood tests can be helpful but is not required with every fainting episode.
- Diagnosis of vasovagal Syncope is recognized by the usual symptoms and normal examination results.
- If the symptoms are typical of vasovagal Syncope and your child's examination results are normal, no further tests are needed.
- In some situations, when an underlying cause is suspected, your child will be referred to a specialist.

Sidra Medicine | PO BOX 26999 Doha, Qatar
+974 4003 3333 | www.sidra.org