Syncope is the medical term for a blackout that is caused by a sudden lack of blood supply to the brain. In older people (65 years and over) there is often more than one potential cause of syncope. Syncope can have many different underlying causes; some can be complex whilst others can be easily treated.

**Medication**

Syncope can be caused by a side effect of some medications. The biggest culprits are heart and blood pressure medications, sleeping pills, antidepressants, and anti-inflammatory drugs. These medications can decrease blood pressure and can increase your chance of fainting.

**Prevention advice:** Once prescribed, your doctor should review your medications regularly to ensure they are not causing problems. Take medications as prescribed; do not take extra pills to make up for missed doses. If you have any concerns, you can discuss these with your healthcare professional.

**Dehydration**

Syncope can occur if you have not drunk enough fluids.

**Prevention advice:** Make sure you are getting enough fluids throughout the day. It is recommended that adults drink two litres (almost 4 pints) of water a day. It is best to drink first thing in the morning, before getting up, and before meals. Increased fluid intake will support your blood pressure. Remember that if you have been ill, exercising, or there has been warm weather you should increase your fluid intake further.

**Orthostatic hypotension**

(Old low blood pressure)

Orthostatic hypotension occurs when the blood pressure falls excessively when standing. Orthostatic hypotension can be age related but can be commonly due to medication.

**Prevention advice:** Elevate the top end of your bed. Sleep with your head elevated 5-20 degrees. This should help keep your blood pressure up and decrease the sudden blood pressure drop when you get up. Always ensure you get up carefully and not too quickly.

Patients with low blood pressure can wear support stockings which will help reduce the blood pooling in the legs and lower abdomen.

**Postprandial hypotension**

(Lowering of blood pressure after a meal)

Postprandial hypotension is a drop in blood pressure within two hours of starting a meal. Postprandial hypotension occurs when the circulation is needed to assist in digestion and this leads to a drop in blood pressure. Symptoms of postprandial hypotension may be subtle with a slight dizziness, fatigue and weakness during or when standing up after eating.

**Prevention advice:** If you are vulnerable to syncope after meals you are advised to take a brief walk after eating a meal or rest lying on your back or sitting in a chair with your feet slightly raised. These actions will help keep your blood pressure up and prevent blood pooling in your feet. Large quantities of carbohydrates (for example bread, potatoes, pasta) should be avoided.
Reflux syncope  
(also known as neurally mediated syncope or vasovagal syncope)  

Reflux syncope is the most common type of syncope. A variety of situations (distress, fear, prolonged standing) can stimulate the vagus nerve which causes the heart rate to slow (bradycardia) and the blood pressure to drop leading to dizziness and syncope.

Carotid sinus hypersensitivity (CSH)  

Carotid sinus hypersensitivity (CSH) is a common cause of syncope in older adults. The carotid sinus is a part of the major artery supplying blood to the head. Any movement that causes stimulation of the area, i.e. turning the head, looking up, or a tight collar can cause syncope. When syncope occurs in CSM, it is then called carotid sinus syndrome.

Prevention advice: Simple techniques such as loosening your collar and avoiding turning your head or neck too far will help reduce your chance of syncope.

Heart rhythm problems  

Syncope can be caused by a heart rhythm that is irregular, too fast (tachycardia) or too slow (bradycardia), resulting in reduced blood supply to the brain.

Prevention advice: A pacemaker can help some people with syncope caused by heart rhythm problems. A pacemaker monitors the heart and restores the heart to a normal heart rhythm therefore maintaining blood flow to the brain and reducing syncope.

Simple advice for all types of syncope

• Have a little salt  
People with high blood pressure, severe heart and kidney problems should usually avoid salt. If you have low blood pressure you might be asked by your doctor to increase your salt intake. Many will find that their symptoms improve when they increase the amount of salt in their diet. Check with your doctor before increasing your salt intake.

• Counter-manœuvres  
If sitting for long periods of time, crossing and uncrossing your legs or elevating them will help blood pump back to the heart and will keep your blood pressure up.

• Gentle exercise  
Staying active is really important. Mild exercise can help encourage your veins to return blood from your lower body to your heart.

• Support tights  
Patients with low blood pressure can wear support tights which will help reduce blood pooling in the lower part of the abdomen and legs.

• Elevate the top end of your bed  
Sleep with your head elevated 5-20 degrees. This should help keep your blood pressure up and decrease sudden pooling of blood upon getting up.

It is important to remember that blackouts or unexplained falls are not ALL caused by syncope (cardiovascular). A multidisciplinary team approach should always be taken to diagnose blackouts or unexplained falls.