

Simple faint

(also known as syncope or vasovagal episode)

Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language, please contact the PALS desk on 01271 314090 or at rduh.pals-northern@nhs.net.

What is a faint?

Fainting happens when the brain does not receive enough oxygen. This is usually because of a reduction in blood pressure, meaning not enough blood containing oxygen is getting to the brain. This causes a person to lose consciousness for a short period of time. It is usually fairly rapid in onset but the person recovers quickly. Some people call this loss of consciousness “blacking out” as people often say their vision goes black.

People who faint will often collapse to the ground.

After a faint people will usually recover quickly although they may feel tired.

What causes fainting?

There are nerves in the body which control blood pressure and heart rate. Sometimes in response to certain triggers these nerves cause an unhelpful response lowering the blood pressure and heart rate. The result is that not enough oxygenated blood gets to the brain.

These nerves are called “autonomic” because they act automatically and we cannot control them.

Classic triggers are taking a blood sample, prolonged standing, emotional experiences, warm environments, and insufficient fluid or food intake.

Fainting can run in some families.

Fainting is very common. About 4 in 10 people will faint at some point in their life.

What are the symptoms?

Symptoms will vary but people will generally describe it as feeling sick, sweaty, lightheaded or dizzy. Some people experience changes in their vision and/or hearing.

Witnesses may describe the person as being very pale.

Sometimes there is very little time between symptoms starting and the person fainting. A few people get no symptoms at all.

How is it diagnosed?

The diagnosis is largely based on the history and examination findings as well as a few basic investigations.

You should have had your blood pressure taken lying down and standing up, and an ECG or heart trace is usually performed.

You may also have had a blood sugar test.

How is it treated / prevented?

If you feel the symptoms coming on:

- Sit down immediately.
- Lie down with your legs up e.g. against a wall.
- Squat down if you cannot sit/lie.
- Clench and relax your calf muscles (the lower part of the leg between knee and ankle). This will help the blood circulation.

It is important to let those around you know what to do if you feel faint or do actually faint.

It is also important that they do not sit you up until you are ready.

Get up cautiously and if symptoms persist lie down again.

Prevention

- Avoid prolonged standing e.g. on a bus, in a queue.
- Keep cool.
- Clench and unclench your calf muscles.
- Drink plenty of non-alcoholic fluids especially during the first half of the day.
- Eat regular meals.
- Regular exercise – after discussion with your doctor.
- Avoid known triggers.

What is the prognosis or expected outcome of treatment?

The prognosis for simple faints is very good especially in young people. Older people are more at risk from harm when they fall and because there may be other causes for the faint e.g. related to the heart or nervous system.

Your doctor may refer you to a specialist for further investigation if they are concerned that your blackouts are not simple faints.

Are there any possible complications?

Sometimes people will injure themselves when they fall to the ground. These injuries may need medical attention.

Some “blackouts” are not caused by faints as discussed in this leaflet. If you have experienced any of the following, you need urgent medical attention:

- Blackout whilst exercising or lying down.
- Family history of sudden or unexplained deaths.
- If you are over 40years old when the blackouts start.
- If you have chest pain or palpitation where you can feel your heart beat.
- If you do not recover rapidly.

Follow up

It is advisable to have a follow up appointment with your GP within one to two weeks of admission/ attendance at the Emergency department.

Driving

Ask your doctor for advice about driving. Most people who have had a typical faint whilst standing do not need to inform the DVLA. If there is any doubt, contact the DVLA.

Drivers' Medical Enquiries
DVLA
Swansea
SA99 1TU

Tel: 0300 790 6806

Further information

www.nhs.uk/conditions/Fainting

[Fainting \(collapse\)](#) by patient.info

References

<http://m.patient.media/pdf/28424.pdf?v=636220857915771225>

Reflex syncope document (STARS.org.uk)

NICE transient loss of consciousness guidance CG 109

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email rduh.pals-northern@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

Have your say

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Tell us about your experience of our services. Share your feedback on the Care Opinion website www.careopinion.org.uk.

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