## **Postural Orthostatic Tachycardia Syndrome** And Orthostatic Intolerance

#### PUPILOMOTOR impaired pupil response NEUROLOGICAL (uncomfortable in bright light) difficulty with vision migraine, cognitive deficits, brain fog & mental clouding SECRETOMOTOR difficulty sweating, tearing and other fluid production (dry eyes, dry mouth, difficulty swallowing, dry skin) GASTROINTESTINAL

nausea, vomiting, diarrhea, constipation, abdominal pain, reflux, heartburn, impaired motility



#### PULMONARY

shortness of breath easily winded difficulty breathing

### AKDIOVASCULAR

palpitations, chest discomfort high heart rate (tachycardia) low heart rate (bradycardia) high or low blood pressure abnormal blood vessel functioning blood pooling

RTNARY difficulty with urine retention and/or excretion

## ORTHOSTATIC INTOLERANCE

difficulty standing still, fatigue, lightheadedness, increase in symptoms with upright posture, fainting (syncope) or near-fainting, pallor

https://thedysautonomiaproject.org/dysautonomia/

#### Other Good Resources:

- http://www.dysautonomiainternational.org
- www.potsuk.org
- https://www.dysautonomiasupport.org/handbooks/
- https://thedvsautonomiaproject.org

POTS is common in people with hypermobility, long-COVID, and after a concussion.



# 10 Facts About POTS: Postural Orthostatic Tachycardia Syndrome

#### Dysautonomia International



There are an estimated 1-3 million Americans living with POTS, making POTS more common than multiple sclerosis. According to Mayo Clinic, POTS impacts 1 in every 100 teens. About 50% of patients develop POTS in adulthood.

About 85-90% of POTS patients are female, most between the ages of 12 and 50.

POTS is a disorder of the autonomic nervous system. When the autonomic nerves don't work properly, this can cause symptoms throughout the body like tachycardia, chest pain, lightheadedness, fainting, fatigue, shortness of breath, GI problems, migraines, cognitive impairment, blood pooling in the extremities, and more.

Some POTS symptoms can be relieved by laying down. This helps restore normal blood flow to the brain and chest area. Improper blood flow makes standing and exercise difficult for POTS patients.

POTS can range from mild to severe. Experts estimate that 25% of POTS patients are so disabled that they cannot work or attend school. Researchers compare the disability seen in POTS to the disability seen in congestive heart failure or COPD.

- POTS is not contagious. About 40% of POTS patients have a family member with POTS or a similar form of dysautonomia, suggesting a genetic component for some patients.
- 50% of POTS patients have a loss of autonomic nerve fibers in their skin. These nerve fibers control our ability to sweat and maintain body temperature. POTS can occur with other forms of neuropathy too.
- POTS patients endure an average four-year diagnostic delay, due in large part to a lack of awareness. The prolonged search for a diagnosis causes tremendous financial strain on the patient and their family, in addition to years of suffering without a diagnosis or proper treatment.

Mayo Clinic research suggests that about five years after diagnosis, 86% of adolescent patients see some improvement (including 19% who report recovery), while 3.5% report worsening over time. Most people who develop POTS live with it as a chronic condition.

There are many non-pharmacological and pharmacological treatments used to manage symptoms, but there is no cure and no FDA approved drugs to treat POTS.

# Dysautonomia International is raising funds for POTS research so that we can find better treatments and *a cure*!

# Learn more: www.CurePOTS.org

http://www.dysautonomiainternational.org/pdf/10Facts.pdf