Poster presentations

101 MASS AND THE DANGERS OF SYNCOPE

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Background: Syncope is defined as a transient, self-limited loss of consciousness with an inability to maintain postural tone that is followed by spontaneous recovery. We have previously described a categorisation of orthostatic hypotension based on pathophysiology, the AVM classification (1).

We now revisit situational syncope with a focus on exploring one situation in particular, Mass. In the 2016 census, 78.3% of Irish people identified as Catholic and attending weekly or daily mass remains common throughout the country.

Methods: We interrogated our electronic syncope database for key terms associated with situational syncope including “cough” “laugh” “Micturition” “Bathroom” “Church” and “Mass”. From the most commonly encountered situation, we interrogated the results of tilt testing performed to identify evidence of orthostatic hypotension.

Results: There were 110 cases of situational syncope identified with 56.3% (n = 62) taking place at mass. Of the mass going group 59.6% were female. The group had a median age of 74 years. All had tilt table testing performed. Of this cohort 27.4% were subsequently diagnosed with orthostatic hypotension and 8% with neurocardiogenic syncope.

Conclusion: Mass attendance involves multiple changes in position from sitting to kneeling to standing up to ten times during a ceremony with stationary standing episodes occurring for up to 4 minutes at a time. The sudden change in position can precipitate an episode of orthostatic hypotension and this was confirmed in almost one third of our cohort. Consideration should be given as to whether it is safe for older mass goers to be subjected to such significant orthostatic stress.

Reference