SYMPTOM

Fainting

Fainting is a brief loss of consciousness caused by reduced blood flow to the brain.

WHAT IT FEELS LIKE
Everything goes dim, then I briefly wake on the floor

WHERE IT IS FELT
Whole body, often after dizziness or dimming vision

MOST COMMON CAUSES
Vasovagal reflex, standing up quickly, dehydration

WHEN IT IS URGENT
A first faint without a clear trigger

USUALLY LASTS
Seconds to a minute, with recovery soon afterward

SEE A DOCTOR IF
Episodes recur or the cause remains unclear

Overview

Fainting is a brief loss of consciousness and muscle control. The medical term is syncope . It happens when blood flow to the brain drops temporarily.

You usually recover after lying flat. Unconsciousness is often brief, although you may feel tired, sick, or unsteady afterward.

Many faints are caused by a harmless reflex, dehydration, or a sudden fall in blood pressure. Less often, fainting is linked to a heart problem or another condition requiring prompt care.

Not every blackout is a faint. Seizures, low blood sugar, head injuries, alcohol, drugs, and other medical emergencies can also cause loss of consciousness.

What it may feel or look like

Before fainting, you may feel lightheaded, warm, sweaty, weak, or sick. Your vision may become grey, narrow, or dark, and sounds may seem distant.

During a faint, your body becomes limp and you may fall. Your skin may look pale. Brief jerking movements can occur and do not always mean you had a seizure.

You usually wake quickly after lying down. Long-lasting confusion, repeated jerking, tongue biting, or loss of bladder control may suggest another cause and should be medically assessed.

A near-faint causes similar warning symptoms without complete loss of consciousness.

Common causes

The most common type is a vasovagal faint . This automatic nervous-system reflex suddenly lowers your heart rate, blood pressure, or both. Triggers include pain, fear, emotional distress, seeing blood, heat, prolonged standing, or having blood taken.

Postural hypotension means blood pressure falls when you stand. It may occur after bed rest, during dehydration, or because of certain medicines. Older adults and people with impaired blood-pressure control are more prone to it.

Situational faints may occur during coughing, urinating, swallowing, or straining during a bowel movement.

Other causes include anemia, low blood sugar, significant blood loss, or problems with the nervous system that controls blood pressure. Medicines for blood pressure, heart conditions, anxiety, or other illnesses may contribute.

Heart-related causes include an abnormal heart rhythm or a structural problem affecting blood flow. These are important to identify, especially if fainting happens without warning, during exercise, or while lying down.

When to seek medical care

Call emergency services if someone who fainted:

Start CPR if the person is not breathing normally, and follow the emergency operator's instructions. If they are breathing but remain unconscious, place them in the recovery position when safe.

Seek same-day medical advice after a first unexplained faint, or if you are pregnant, have known heart disease, or have a family history of sudden unexplained death. Also get prompt advice if a new medicine or dose change may be involved.

Book a routine appointment if episodes recur, you often feel close to fainting, or the cause remains unclear. Discuss any faint that affects driving, work, or daily safety.

- Is not breathing normally or cannot be woken promptly

- Has chest pain, severe breathlessness, or a pounding or irregular heartbeat
- Fainted during exercise or while lying down
- Has weakness on one side, trouble speaking, or a severe new headache
- Has serious bleeding, black stools, or a significant injury
- Remains confused or has prolonged or repeated seizure-like movements

How the cause is found

A clinician will ask what happened before, during, and after the episode. Information from a witness can be especially helpful, including your position, possible triggers, warning symptoms, movements, duration of unconsciousness, and speed of recovery.

The assessment may include your medical and family history, medicines, heart and neurological examinations, blood pressure while lying and standing, and an electrocardiogram, or ECG.

Blood tests may be used if anemia, low blood sugar, pregnancy, bleeding, or another problem is suspected. Further tests may include a portable heart monitor, heart ultrasound, or tilt-table test. Brain scans and seizure tests are generally reserved for signs of a neurological cause or head injury.

Treatment and self-care

Treatment depends on the cause. If you feel faint, lie flat and raise your legs if possible. If you cannot lie down, sit and lower your head to reduce the risk of falling.

After fainting, remain lying down for several minutes and stand slowly. Do not give food or drink until the person is fully awake and can swallow safely.

Drinking enough fluid and eating regularly may help if dehydration or missed meals are triggers. Follow any fluid restrictions given for a heart or kidney condition. Avoid overheating and prolonged standing if these trigger episodes.

A clinician may review medicines, teach physical movements that raise blood pressure, or treat an underlying condition. Do not stop prescribed medicine on your own.

Avoid driving, heights, swimming alone, or operating machinery after an unexplained faint until you receive medical advice. Driving rules vary by location and cause.

What to expect

Recovery from a simple faint is usually quick, although tiredness or nausea may last longer. Some people have only one episode; others faint again when exposed to the same trigger.

Reflex and postural faints can often be managed by recognising warning signs and avoiding triggers. Heart-related or unexplained fainting may require specialist assessment and ongoing treatment.

Common questions

Is fainting the same as a seizure?

No. Both can cause loss of consciousness, and brief jerking can occur during a faint. A seizure is more likely if movements are prolonged, the tongue is bitten, or confusion continues well after waking. Medical assessment may be needed to distinguish them.

Can stress or anxiety cause fainting?

Strong emotion, pain, or fear can trigger a vasovagal faint. Anxiety can also cause dizziness without loss of consciousness. Do not assume a blackout is caused by anxiety, especially without a clear trigger.

Should I eat or drink immediately afterward?

Wait until you are fully awake, sitting safely, and able to swallow normally. Water and a light snack may help if dehydration or a missed meal contributed, but they do not replace assessment when warning signs are present.

Sources

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