

Other simple measures to help treat someone with postural hypotension include:

- Changing position slowly from lying to sitting to standing. A person may need help with this from a relative or carer;
- Maintaining good fluid intake;
- Maintaining salt intake between 4-10g per day, unless advised otherwise by a doctor;
- Avoid excess alcohol and large carbohydrate heavy meals;
- Avoid very warm environments and very hot showers and baths;
- Sleep with the head of the bed elevated;
- Gentle exercise programmes such as aerobics, walking, cycling or swimming;
- Crossing legs or tensing muscles in the legs and buttocks after standing;
- Compression garments for the legs or abdomen (only if advised by a healthcare professional);
- Informing family/carers. Sometimes people need additional support to reduce falls.

Medical Management

If non-medical measures don't improve symptoms, there are some medications which can be used as a last resort to help. Please consult a doctor for further advice regarding this if required.

Postural Hypotension in Older People



Your Feedback

We want your visit to be as comfortable as possible - talk to the person in charge if you have any concerns. If the ward/ department staff are unable to resolve it, then ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. **Before leaving please complete a Friends and Family Test feedback card.** Help us transform NHS services and to support patient choice.

OUR VALUES



- Collaboration** We work positively with others to achieve shared aims
- Accountability** We act with professionalism and integrity, delivering what we commit to, embedding learning when things do not go to plan
- Respect** We are anti-discriminatory, treating people fairly and creating a sense of belonging and pride
- Empowerment** We speak out when things don't feel right, we are innovative and make changes to support continuous improvement
- Support** We are compassionate, listen attentively and are kind to ourselves and each other



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240

Authors: Dr Edward Benn – Foundation trainee
Dr Aban Dasgupta – Consultant Physician

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James Paget University Hospitals NHS Foundation Trust

Information for patients,
relatives or carers

What is Postural Hypotension?

Postural hypotension, also known as orthostatic hypotension, is when a person's blood pressure drops when standing from a lying or sitting position. It is often accompanied by symptoms such as dizziness, visual changes, or fainting.

Older people are at increased risk of postural hypotension, affecting about one in five (20%) of people over 60 years in the general population, and is even more common amongst those in hospital.

Postural hypotension can significantly affect a person's life. Those affected are roughly twice as likely to have a fall. Postural hypotension also increases the chance of heart disease, having a stroke, and developing dementia, as well as increasing the risk of dying from any cause.

Symptoms of Postural Hypotension

Postural hypotension can cause a variety of symptoms, such as:

- Dizziness or light-headedness;
- Fainting;
- Falls;
- Visual changes;
- Feeling or being sick;
- Weakness;

Sometimes people have no symptoms at all.

What causes Postural Hypotension?

Postural hypotension happens when blood from the body pools in the blood vessels of the legs and abdomen after standing.

Normally, the nervous system responds by pushing blood back towards the heart and making the heart pump harder (called the baroreceptor reflex). People with postural hypotension are less able to do this.

It can be caused by many things, including:

- Increased age;
- Dehydration (such as from diarrhoea, vomiting or not drinking enough fluids);
- Medications, especially those to treat high blood pressure;
- Heart conditions, such as valve disease, heart failure or abnormal heart rhythms;
- Hormone (endocrine) problems such as low thyroid levels or diabetes;
- Conditions affecting the nervous system, such as Parkinson's disease or low vitamin B12 levels.

Sometimes no cause is found at all.

It is important to remember that if you experience physical illnesses, such as diarrhoea or vomiting, then you should follow the "sick day rules" for medication you are taking. This may mean skipping certain medications.

How is it diagnosed?

Postural hypotension is diagnosed by measuring a person's blood pressure lying down and then when standing up to see if it decreases.

A person's blood pressure is recorded with two numbers - the systolic blood pressure (the higher number), and diastolic blood pressure (the lower number), both measured in mmHg. For example, a normal blood pressure may be 120/90 mmHg.

Postural hypotension is diagnosed if, on standing, there is a 20 mmHg drop in systolic blood pressure or a 10 mmHg drop in the diastolic blood pressure (if symptoms are also present). It is also diagnosed if the systolic blood pressure drops below 90 mmHg.

Additionally, a heart tracing (electrocardiogram) and blood tests may be done. This is to help identify the cause of postural hypotension.

Managing Postural Hypotension

The most important goal in management is to improve symptoms and prevent falls.

A doctor will first try to identify if there is a reversible cause that can be treated, such as rehydrating someone who is dehydrated or adjusting their medications.