**Tower Bridge Hospital London**

**Tower Bridge Hospital London**
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · URGENT CARE AND CARDIOLOGY

# Fainting and blackouts
## *the ordinary kind, and the kind that needs investigating*

Most faints are harmless: a brief drop in blood pressure with clear triggers and clear warning signs, followed by rapid full recovery. A minority point to a heart problem, and those are identified by the circumstances rather than by how dramatic the faint looked.

### Seek urgent assessment if the faint

- happened **during exercise or exertion**, rather than after it
- came with **no warning at all** — no dizziness, no feeling hot or sick beforehand
- was preceded by **chest pain or palpitations**
- happened **while lying down or sitting**
- caused a **significant injury** because there was no time to protect yourself
- occurred in someone with **known heart disease**, or a family history of sudden unexplained death under 40

Also seek urgent help if recovery was not rapid and complete, if there was prolonged jerking or confusion afterwards, if there was tongue biting or loss of bladder control, or if the person is pregnant or over 65. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

## The ordinary faint

A simple faint happens when blood pressure and heart rate drop briefly, reducing blood flow to the brain. Common triggers are standing for a long time, heat, a hot bath, pain, the sight of blood, having blood taken, coughing, straining, dehydration, missing meals, or a sudden fright.

There is almost always a warning: feeling light-headed or hot, sweating, nausea, ringing in the ears, and vision closing in from the edges. Recovery is quick and complete within a minute or two, though feeling washed out for a few hours afterwards is normal. Brief twitching as someone faints is common and does not mean it was a seizure.

## Stopping a faint before it happens

If you feel one coming on, act at once rather than trying to carry on.

1. **Lie down immediately and raise your legs.** If you cannot lie down, sit and put your head between your knees.
2. **Cross your legs and tense them hard**, squeezing your thighs and buttocks together. This pushes blood back towards the heart and often aborts the faint.
3. **Grip one hand with the other and pull apart hard**, tensing your arms at the same time.
4. **Stay down until the feeling has fully passed**, then get up slowly in stages.

## If someone else faints

- **Lay them flat and raise their legs** above heart level.
- **Do not sit them up or prop them in a chair**, and never try to walk them to fresh air — this is the commonest mistake and it prolongs the faint.
- Loosen tight clothing at the neck and make space around them.
- If they do not regain consciousness within a minute, put them in the recovery position and **call 999**.
- When they come round, let them lie still for several minutes before sitting, then before standing.
- Do not give anything to eat or drink until they are fully alert.

## Reducing how often it happens

- Drink enough fluid through the day; dehydration is the most common contributor.
- Do not skip meals.
- Stand up in stages — sit on the edge of the bed for a moment before standing.
- Avoid standing still for long periods; if you must, shift your weight and flex your calves.
- Be careful with hot baths, saunas and alcohol.
- Tell the person taking your blood that you faint — they will lie you down.

### Medicines can be the cause

Blood pressure tablets, diuretics, some antidepressants, medicines for prostate symptoms and nitrates for angina all commonly cause faints, particularly in older people and particularly after a recent dose change. Bring a list of everything you take to your appointment — the answer is often an adjustment rather than an investigation.

## Driving

There are legal rules about driving after a blackout, and they depend on the cause, whether there was warning, and whether you hold an ordinary or a vocational licence. A single simple faint with clear triggers and warning usually carries no restriction. An unexplained blackout does. You must inform the DVLA in certain circumstances and it is your responsibility to do so — we will advise you which category you fall into and can put it in writing.

## What assessment involves

Usually an account of exactly what happened before, during and after — which is the most valuable part — along with an examination, lying and standing blood pressure, an ECG, and blood tests. Where the story or the ECG raises questions, a heart rhythm monitor, an echocardiogram or a cardiology opinion may follow.

**Book an appointment if** you have fainted and are unsure why, if it is happening repeatedly, if you need an ECG or heart rhythm monitoring, or if you need advice about driving or fitness for work. We have ECG, echocardiography and cardiology on site, seven days a week.

### ECG and cardiology on site

Same-day appointments most days, seven days a week, 9am–7pm, on Whitechapel Road.

**Book an appointment**

or call 020 7916 0029

### Where to get help

**Tower Bridge Hospital London**
97–99 Whitechapel Road, London E1 1DT

**020 7916 0029**

WhatsApp **07903 284 189**
**info@mhwclinic.co.uk**
Open 7 days, 9am–7pm

**In an emergency**
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

**When we are closed and it is not an emergency**
Call NHS 111 or visit 111.nhs.uk.

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**Written and reviewed by Dr H Bolat, GP & Clinical Director** **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS, NICE and DVLA guidance on transient loss of consciousness. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.