How is POTS treated?

Living with POTS presents challenges, but effective management strategies can reduce symptoms.

Treatment approaches typically involve lifestyle modifications, medication, supportive measures, and avoidance of triggers.

- Lifestyle modifications e.g. increasing salt and water intake, wearing compression garments from ankle to high waist, monitored and individualised movement program
- Medication e.g. medications prescribed and managed by a doctor such as ivabradine, midodrine, fludrocortisone or low-dose propranolol
- Supportive measures e.g. employing mindfulness techniques, fostering emotional wellbeing, managing nutrition and adequate sleep and seeking psychological support to adjust to managing a chronic illness
- Avoidance of triggers e.g. hot environments, large carbohydrate meals, caffeine or alcohol, too much strenuous activity, long periods of inactivity, and high stress environments

Where can I get more information?

The Australian POTS Foundation regularly runs webinars and education sessions. For more information, make sure you follow our socials or visit our website.

Other websites and resources that may be helpful include:

- The Dysautonomia Project
- Standing up to POTS POTSCAST
- PoTS UK
- Dysautonomia International
- Ehlers-Danlos Society
- Connective Tissue Disorder Network Australia
- Lifeline
- Kids Helpline
- Beyond Blue
- Missing School

Australian POTS Foundation Membership

Join the Australian POTS Foundation as an associate member and gain access to exclusive discounts for supportive therapies such as salt hydration and compression from our partners. You will also gain discounts and early access to our videos, webinars and conferences.

Your membership strengthens our collective voice and demonstrates the importance of our cause to policy makers and the broader community.

Membership







Understanding
Postural
Orthostatic
Tachycardia
Syndrome (POTS)





Being diagnosed with POTS can feel overwhelming, but we want you to know that you're not alone. The Australian POTS Foundation is here to guide you, with trusted information, helpful resources, and a supportive community that truly understands.

What is POTS?

Postural (positional)
Orthostatic (standing still in an upright position)

Tachycardia (faster than normal heart rate) Syndrome (a group of symptoms that occur together),

is a condition that affects the body's autonomic nervous system. This system controls unconscious functions like:

- heart rate, blood pressure
- digestion and gut function
- temperature and sweat function

In people with POTS, poor autonomic control can produce a wide range of symptoms. The most obvious and common, being dizziness and a rapid heart rate when changing positions - such as moving from lying to standing.

Who gets POTS?

POTS can affect individuals of any age, sex, or background however, it is more commonly diagnosed in women, particularly those between the age of 14-50 years.

While the exact cause of POTS is not always clear, certain environmental triggers such as viral infection, neck trauma and times of hormonal change (such as pregnancy) may increase the risk of developing the condition. Individuals with a history of certain conditions such as Ehlers-Danlos syndrome, migraine, endometriosis and autoimmune disorders appear to be more predisposed to developing POTS.

What are the symptoms of POTS?

Living with POTS can be challenging, as symptoms can vary greatly from person to person and even fluctuate from day to day. For some, symptoms may be mild and manageable, while for others, they can be more severe and impact daily life significantly. It's important to understand that POTS is a complex condition, and the way it affects each individual can differ.

Symptoms include:

- Dizziness and light-headedness
- Rapid heartbeat
- Fatigue
- Difficulty concentrating
- Nausea and gastrointestinal problems
- Bladder problems
- Headaches
- Vision changes
- Dry eyes and mouth
- Temperature regulation problems

How is POTS diagnosed?

Diagnosing POTS is crucial for understanding and managing your condition. Your doctor will start with blood tests to rule out other possible causes of dizziness like anaemia or uncontrolled thyroid disorders. Following this there are a range of tests that may be undertaken, with the most common and effective diagnostic tool being the Active Stand Test. (Follow QR code for test templates).

General practitioners are able to diagnose POTS and start treatment but they may refer you to a specialist to rule out other conditions. Tilt table testing may be used in some cases but is not necessary for a diagnosis.

Additional tests like Holter monitoring or echocardiograms may also be used to rule out other causes of your symptoms.

It is important to factor in all the symptoms that might be caused by the autonomic nervous system when assessing for POTS.

This can be done by a thorough medical history and by completing symptom surveys such as the MALMO POTS questionnaire (MAPS) which can be completed at home.



