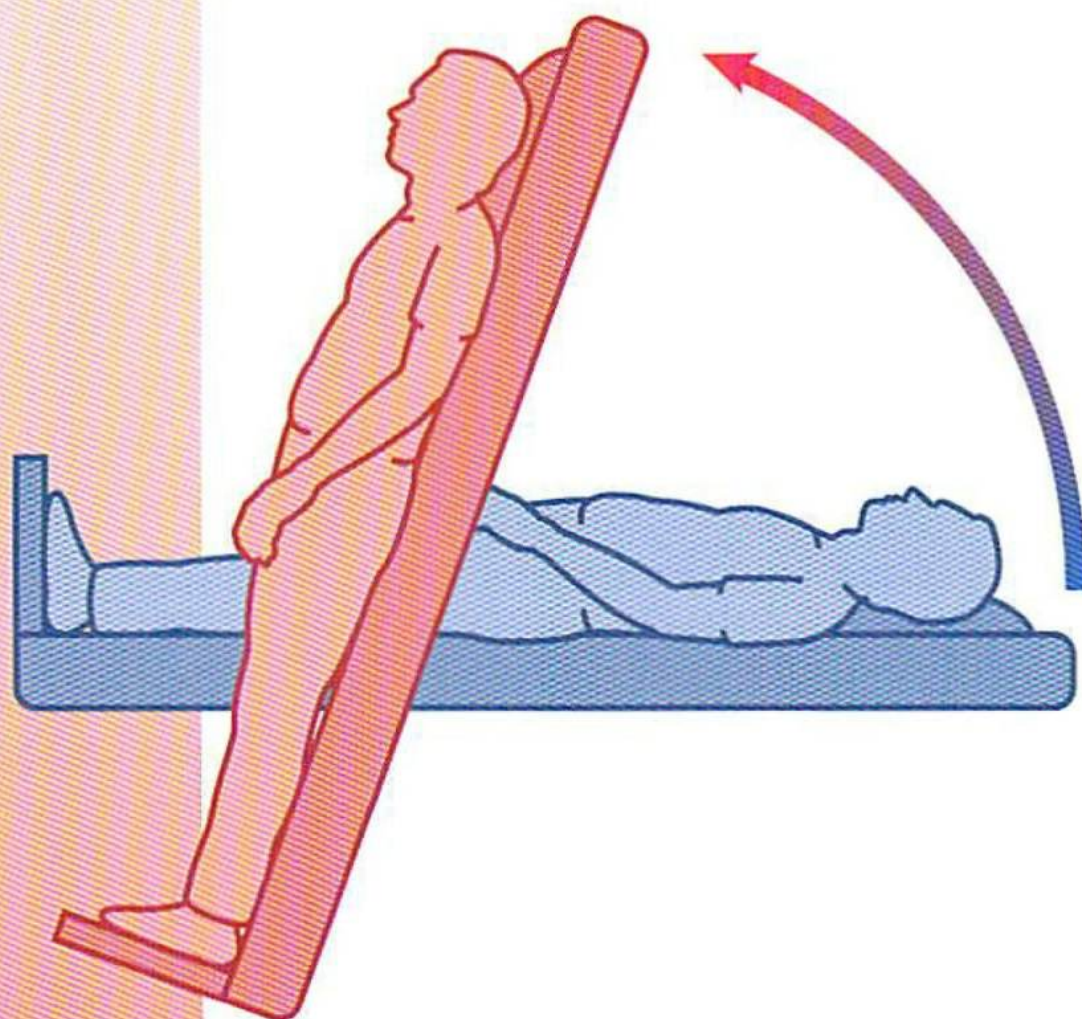


Tilt Table Test



A Patient's Guide

What Is a Tilt Table Test?

If you have had syncope (fainting), a tilt table test can help your doctor determine the cause of the problem. During the test, you lie on a table that can be moved upright (head up, feet down) while your heart rate, blood pressure, and symptoms are closely monitored.

Why Is the Test Done?

Syncope is commonly known as fainting. It refers to a sudden loss of consciousness, which is followed by a rapid and complete recovery. Syncope occurs when the brain does not get enough blood and oxygen.

Tilt table testing is used to assess a common type of syncope, called **vasovagal syncope**, also referred to as neurocardiogenic syncope or the “common faint.”

Vasovagal syncope may be triggered by standing for long periods, heat, pain, fear, the sight of blood, or emotional distress. It often occurs in young, healthy people. Usually there are warning symptoms such as dizziness, nausea, and sweating. Sometimes, loss of consciousness occurs without a warning.

In vasovagal syncope, the nerves that control the function of the heart and blood vessels do not work properly. This can cause the heartbeat to slow down and blood pressure to drop when they should not. In turn, this may cause a loss of consciousness.

The tilt table test helps determine whether a person is susceptible to (likely to have) vasovagal syncope.

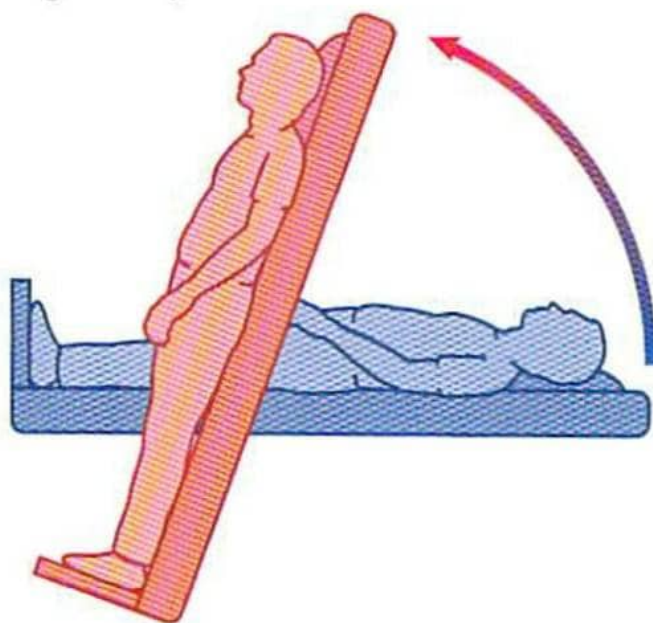
How Does the Test Work?

During the test, you lie on a special table that can be moved to a nearly upright position. This causes blood to pool (settle) in the lower part of the body.

As a result of the tilt, less blood returns to the heart, less blood is available for the heart to pump, and blood pressure starts to drop.

Normally, the nerves that control the function of the heart and blood vessels maintain normal blood pressure. They do so by making the heart beat faster and by tightening blood vessels.

In people who are susceptible to vasovagal syncope, these nerves do not work properly. As a result, the heart slows down, the blood pressure drops, and symptoms occur. Once the table is lowered to a flat (horizontal) position, normal flow to the brain is restored, and the symptoms go away.



Preparing for the Test

- Generally, you will be asked not to eat or drink for at least 4 hours before the test. If you have diabetes and take medication for it, you will need special instructions.
- If you take heart medications, check with your doctor when you schedule the test. He or she may ask you to stop certain medications a day or two before the test.
- Make arrangements for someone to drive you home, since you may not be permitted to drive after the test.
- The procedure will be explained to you and you will be asked to sign a consent form. Feel free to ask questions.

What Happens During the Test?

The tilt table test is generally performed at a hospital, test center, or clinic.

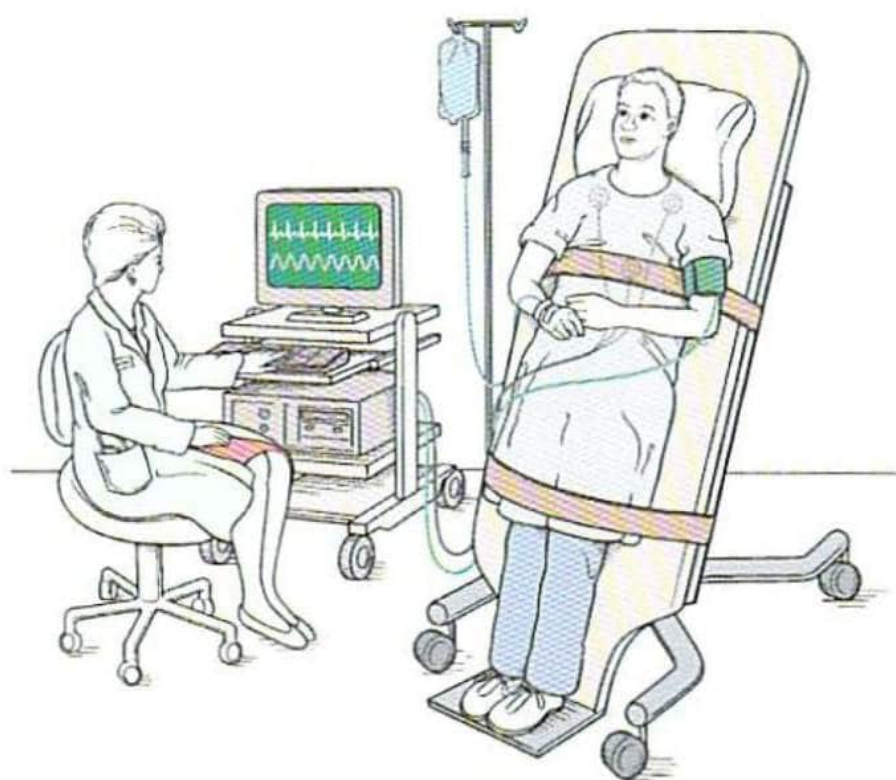
Several electrodes (small sticky patches) are placed on your chest to obtain an electrocardiogram (ECG) and monitor your heartbeat.

A blood pressure cuff, or a similar device, is placed on one arm to monitor your blood pressure during the test. An intravenous (IV) line is inserted into a vein in your other arm, so that fluids and medications can be injected, if needed.

You will then be asked to lie down on a special table that has a footboard and safety straps. The straps are fastened across your chest and legs.

You first lie quietly for several minutes. The table is then moved until your head is nearly upright, a tilt of about 60 to 70 degrees. Even though you are lying on a table that is at a steep angle, you feel as if you are standing on the footboard.

You remain in this upright position for a relatively long period of time, up to 45 minutes. Your heart rate and blood pressure are continuously monitored. It is important that you *let the doctor or nurse know* if you develop symptoms, such as dizziness or nausea.



People who are susceptible to vasovagal syncope often develop a decrease in heart rate and/or a drop in blood pressure during the test. In addition, they may experience symptoms such as dizziness, nausea, or sweating. In that case, the table is lowered to the flat position, which restores normal blood pressure within a few seconds.

If you complete the 45-minute period of upright tilt without developing a significant drop in blood pressure, the table is lowered to the flat position and you *may* undergo the second part of the test.

The second part of the test evaluates how your blood pressure responds to a medication (Isuprel) that is very much like your own adrenaline. (Adrenaline is a hormone that is produced when you exercise or when you are angry, excited, or under stress.)

The medication is injected very slowly through the IV line in your vein. You may feel your heart beating a little faster and stronger. The table is again moved to an upright position, for up to another 45 minutes, while you are closely monitored.

What Is a Positive Test?

The test is called “positive” (abnormal) if your blood pressure drops and you experience symptoms. The symptoms may include dizziness, nausea, a cold and clammy feeling, or a sensation that you are about to pass out. Few patients actually faint during the test, because the table is returned to the flat position before they lose consciousness.

After the Test

A complete tilt table test, including preparation for the test, generally lasts from one to two hours.

You may feel a little unsettled and possibly queasy for the first few minutes after the test. If this happens, you will be allowed to fully recover before you stand up and get dressed. You may also feel tired after a lengthy test. That is why it is best to have someone drive you home.

Is the Test Safe?

The tilt table test is generally safe. By design, it *may* cause you to faint for a few moments. Should this occur, the table is lowered quickly to the flat position and the test is stopped. A doctor, a nurse, and other personnel are there to handle any emergency.

Your Test Results

The doctor conducting the test may be able to give you preliminary test results before you leave. Or, your own doctor will discuss the test results with you during a future office visit.

The test helps doctors determine whether or not you are susceptible to vasovagal syncope. The information gained from this test helps the doctors make a more accurate diagnosis and develop a treatment plan that is best for you.

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