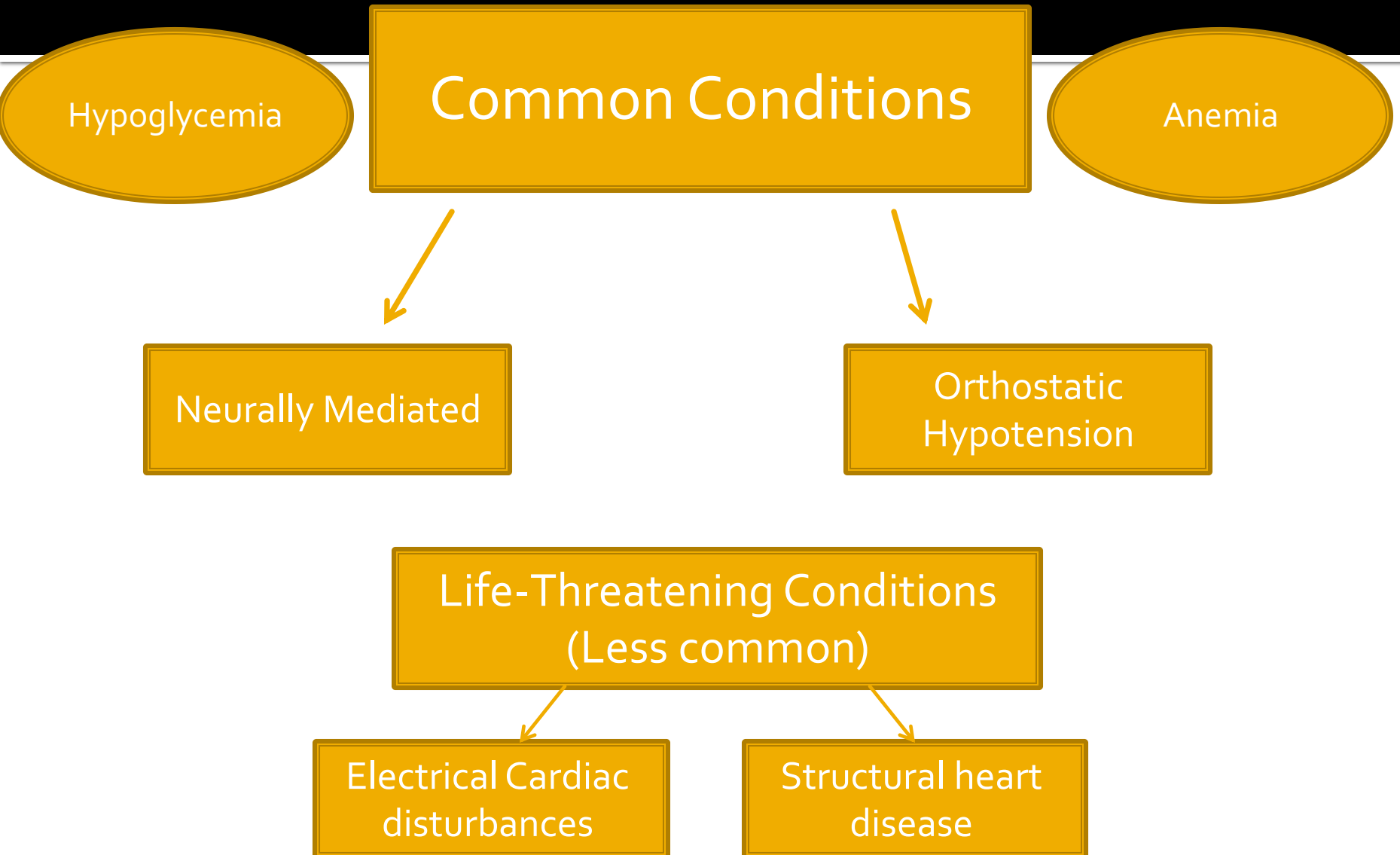


# Loss of Consciousness Syncope VS Epilepsy

# Syncope



# Neurally Mediated Syncope

- Vasovagal (neurocardiogenic):
  - Most common cause of syncope → 25%-30%
  - Neural reflex resulting in self-limited systemic hypotension
  - Pathogenesis:
    - Cardioinhibitory response → more common
    - Vasodepressor response
  - Clinically:
    - Prodrome → nausea, pallor, diaphoresis
    - **Classical** → induced by emotional or orthostatic stress (fear, pain, heat)
    - **Non-classical** → usually older patients, may have no apparent stressor, may be combined with orthostatism
  - Evaluation:
    - Tilt-table testing → Sensitivity 60%-70%
    - Adenosine provocation

# History Taking Circumstances

- Activity:
  - Micturition/Defecation → Reflex Syncope
  - Physical exercise → Cardiac (structural/electrical)
- Predisposing Factors:
  - Head movement/shaving → Carotid sinus h.s.
  - Fear/Pain → classic Vasovagal (Reflex) syncope
  - Heat/Dehydration → Reflex syncope
  - Flashing lights/sleep deprivation → Epilepsy

# History Taking

## Events at Onset

- Nausea, sweating, pallor → reflex syncope
- Palpitations → cardiac arrhythmia
- Abdominal sensations, unpleasant smell/taste, déjà-vu, jamais-vu → Epileptic aura

# History Taking

## Events During Attack

### ■ Fall:

- Epilepsy:
  - Stiff (rarely syncope)
- Syncope:
  - Flaccid

### ■ Movements:

- Epilepsy:
  - Beginning before the fall
  - At onset of LOC
  - Lasting >30s to minutes
- Syncope:
  - Beginning after the fall
  - After onset of LOC
  - Lasting <15sec

### •Other:

- Epilepsy:
  - Lateral tongue bite
  - Frothing at the mouth
  - Incontinence**
  - Automatism → chewing, blinking
- Syncope:
  - Anterior tongue bite
  - Incontinence**

# History Taking

## Events after attack

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- Syncope:
  - Nausea, sweating, pallor – autonomic activation
  - Clearheaded immediately upon regaining consciousness
- Epilepsy:
  - Confused for minutes after regaining consciousness

# Quick Evaluation System Syncope VS Epilepsy

	Points
Wake with tongue cutting?	2
Déjà vu or jamais vu?	1
Emotional stress associated with loss of consciousness?	1
Head turning during a spell	1
Unresponsive, unusual posture, limb movement, or amnesia of spells? (any one of these)	1
Confusion after a spell	1
Lightheaded spells	-2
Sweating before spell	-2
Spell associated with prolonged sitting or standing	-2

If point score is  $\geq 1$  the likelihood is seizure or if  $< 1$  the likelihood is syncope.

**Table: Questionnaire and scoring system for symptoms pertaining to loss of consciousness<sup>10</sup>**





# References

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