

# Hyperventilation syndrome

**This leaflet gives advice on how to cope with hyperventilation once you have left the Emergency Department.**

## What is hyperventilation syndrome?

This is a syndrome of over-breathing when the body does not need it. It may be chronic (happens all the time) or recurrent (comes in attacks then goes away). It is associated with symptoms felt in the body which may be very frightening and unpleasant but are not harmful. It is very common, especially in females, those aged 15-55 and asthmatics and can happen after strong emotion such as anger, fear or excitement or panic attacks.

When you hyperventilate, it causes a lowering of the amount of carbon dioxide that is normally carried in your blood and it is this that leads to the symptoms.

## What are the symptoms?

You may experience symptoms such as:

- Shortness of breath, and a feeling of being unable to breathe.
  - Tightness in the chest.
  - Fear of dying.
  - Tingling or numbness in both arms, fingers, toes or around the mouth.
  - Dizziness, weakness, palpitations (fast heart beat), sweating, feeling hot or cold.
- Symptoms tend to come on at rest while reading or watching TV, and are not related to exertion.

## What tests are needed?

Tests are not usually needed to diagnose hyperventilation, but may be done to exclude a more serious cause of your symptoms. These tests may include blood tests, an ECG (tracing of your heart) or a chest x-ray.

## Self-help for hyperventilation symptoms

If you have been diagnosed with hyperventilation then you can treat yourself at home without needing to come to the Emergency Department and learn how to control your symptoms. Remember: the symptoms are very unpleasant but are not harmful and you do not have a serious medical problem. They can lead to a vicious cycle of feeling very ill, producing more anxiety and worsening of symptoms.

If you feel the symptoms coming on:

- **Stop what you are doing and sit down.**
- Concentrate on slow regular breathing – in and out – aim for 8-10 breaths a minute.
- If this doesn't help, use the re-breathing technique: make a mask with your hands, breathe in through your nose and out through your mouth, or use a paper bag (never plastic) over your mouth and nose.

As your breathing slows, your symptoms will settle.

## Recurrent attacks

If you are experiencing recurrent attacks, you should seek help from your GP. He/she can give further advice and offer further help such as counselling, treatment of illnesses such as depression, relaxation techniques or breathing exercises. Drug treatment is best avoided except in exceptional cases.

## Tell us your views

If you wish to discuss any aspect of your treatment and care, please speak to a senior member of staff or to the nurse looking after you. The matrons are also available during normal working hours and they welcome your views.

You can also pick up a copy of the Trust leaflet called 'Patient Advice and Liaison Service (PALS)' which explains how you can raise concerns or give feedback on your experience at the hospital

## Friends and Family Test

Whatever your experience you can give feedback by answering the Friends & Family test question – 'Overall, how was your experience of our service?' – by going online [www.royalberkshire.nhs.uk/get-in-touch/friends-and-family-survey.htm](http://www.royalberkshire.nhs.uk/get-in-touch/friends-and-family-survey.htm).

To find out more about our Trust visit [www.royalberkshire.nhs.uk](http://www.royalberkshire.nhs.uk)

**Please ask if you need this information in another language or format.**

Emergency Department, June 2022.

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