

Commonly prescribed

POTS MEDICATIONS

www.potsuk.org/managingpots

TRIED? TAKING MEDICATION

Beta Blockers

These help with adrenaline symptoms. Beta blockers will lower your blood pressure, so if yours is quite low, this might not work for you.

Note: Beta Blockers often degranulate mast cell so they may not be a good option if you have MCAS

Clonidine & Methyldopa

May be used in Hyperadrenergic POTS. These lower the heart rate and may reduce blood pressure by working directly on the brain.

Fludrocortisone

This is a synthetic steroid that retains salt and produces an increase in the volume of blood within the blood vessels. It does not have all the same side effects as other steroids (e.g.prednisolone) that often worry patients. Blood potassium levels need to be monitored with this medication.

Ivabradine

This is not an FDA-approved drug for POTS but due to its ability to reduce HR, it has shown improvement in POTS patients in many studies.

Pyridostigmine

This acts on the nervous system to reduce heart rate by increasing:

- Vagal tone – part of the parasympathetic 'rest and digest' nervous system
- Sympathetic tone – influences of the sympathetic nervous system on muscle tone.

Midodrine

The aim of an alpha agonist is to narrow blood vessels to help return the blood back to the heart. Side effects are high blood pressure and sometimes worsening of symptoms.

Modafinil or other stimulant medications

May be used in Hyperadrenergic POTS. These lower the heart rate and may reduce blood pressure by working directly on the brain. is a stimulant normally used in some sleep disorders, and may improve alertness and decrease mental clouding in those with POTS.

Source: www.potsuk.org/managingpots/medication-2

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