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• **BREATHOLDING SPELL.**

This clinical entity is most common in the age range of 18 months and 3 years, but it can be seen in kids as young as 12 months and as old as 4 years. It is not related to epilepsy or seizure disorders. It is though an abnormal reflex response that may be triggered by a sudden event on the patient, for example:

- a) Sudden fall
- b) Sudden fear or fright
- c) Sudden anger, fit or tantrum

Typically it presents with a long cry and then breath - holding ensues turning lips bluish and almost faint, but generally the recovery occurs within a minute.

Breath-holding spells are divided in 2 types:

- 1) **Cyanotic type**, bluish discoloration during the spell, very common.
- 2) **Pallid type**, generalized pallor during the spell, this is very uncommon but if present it warrants a pediatric consultation.

Home care is primarily positioning the child horizontal and applying cold compresses to the head, and make sure you do not cave in to the child when the spell is caused by a fit or tantrum.

Consult the pediatrician when:

- **Fainting**, longer than 1 minute.
- **Frequency**, more than 1 spell/week.
- **Muscular contractions** or twitching, during the spell.

Recently an association between spells and iron deficiency anemia has been documented, and it is commonplace to test a blood sample to rule out anemia, which if present it is easily treated and spells decrease significantly.