

## Breath holding

Breath holding is common, especially in children under six years of age. Breath holding spells can happen after your child has a fright, a minor accident, is frustrated or gets very upset. Breath holding is often called a 'spell' or an 'attack' and is most common in toddlers (one to two years of age). Most children grow out of breath holding by the time they reach the age of six.

Children who have breath holding spells may:

- cry and breath hold (stop breathing)
- become listless and collapse or faint
- lose consciousness
- become pale or blue in colour

If your child holds their breath for a long time, they may have muscle twitching or a fit (seizure). However, this is **rare**.

Breath holding is frightening and distressing for parents and witnesses. It is important to remember the attack is not harmful and your child will start breathing again on their own.

### Causes

The cause of breath holding is not known but tends to be caused by a slowing of the heart rate or changes in a child's usual breathing patterns. Sometimes there is a family history of similar events. Sometimes it is brought on by strong emotions including anger, fear, pain or frustration. Breath holding is not caused by a health problem and will not harm your child.

It is believed that children who have breath holding spells may be more likely to faint (pass out) as adolescents and sometimes as adults.

### Signs and symptoms

There are two main types of breath holding:

- **Blue spells** (cyanotic breath holding): are the most common. The child may have hurt themselves or become very upset or frustrated. They may cry or scream and turn red and then blue, especially around the lips. This is caused by a lack of oxygen. This lasts a short time and the child may become floppy and unconscious. Although this is scary to watch, no treatment is needed. *There is no need to splash the child with cold water or blow air in their face.*
- **Pale spells** (pallid breath holding): are less common. They can happen in young children after a minor injury or if the child is upset. Your child may open their mouth as if to cry but no sound comes out, they may faint or lose consciousness and look very pale. *No treatment is needed and your child will start breathing and recover by themselves.*

Your child may recover quickly or be drowsy and sleep for a short while. Some children may have a fit (seizure) after a prolonged attack. *This is rare* and not harmful.

### Treatment

While your child is having a spell, lay them on their side and watch them, and remove objects from around the child to prevent injury. Your child will start to breathe on their own. *Do not put anything in their mouth, including your fingers.*

Once your child has recovered it is important to act normally. Don't punish or reward them or make a big fuss. Treat your child as if nothing has happened.

It is also important not to 'give in' to your child to stop another attack from happening in the future. Sometimes children will throw a tantrum and breath hold when they don't get their way or can't have a toy or treat. Distraction may be a good way of avoiding a tantrum and a resulting breath holding spell.

### When to see your doctor

If your child is:

- Having very frequent attacks (more than once a day or several times a week). This may be still be normal but should be assessed by a doctor.
- If your child has a fit (seizure) which lasts longer than a couple of minutes and is then confused or drowsy for several hours after the spell.
- Becomes very pale or unconscious for no reason.

### Key points to remember

- Breath holding is common especially in young children.
- The 'attack' is not harmful to your child.
- After the 'attack' treat your child as normally as possible.

### More information

- If you have concerns or questions contact your local doctor or your Maternal and Child Health Nurse.

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#### Disclaimer

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