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# An Algorithm Approach to Pediatric Diagnosis

# **Breath-holding Spells**

Srikiran Aroor

### Introduction



- Breath-holding spells are paroxysmal self-limiting events.
- They are a result of provocation (pain, anger, or frustration).
- They result in crying followed by apnea during the expiration phase of crying.
- It could be followed by occurrence of either cyanosis (cyanotic type) or pallor (pallid type).
- O There may be a loss of consciousness and altered body tone for a brief period usually lasting for 1 minute during or after the spell.
- O They are seen in up to 10% of healthy babies between the age group of 6 months and 6 years, though the typical age of onset is between 6 months and 18 months.
- O It is also termed infantile syncope.
- The cyanotic type is more common and follows anger or frustration.
- The pallid type is rarer and usually results from sudden fright or pain.
- O A mixed type may also occur.

### **Etiology**

- The etiology of breath-holding spells is not definite. Recent research suggests genetically mediated dysregulation of autonomic nervous system reflex is responsible for the spells.
- O Pallid type is supposedly secondary to cardiac asystole similar to vasovagal attack.
- O Cyanotic type results from a rise in intrathoracic pressure leading to impaired cerebral circulation.
- Anemia due to the compensatory mechanism of the autonomic system results in cerebral hypoxia.

# **Red Flag Signs**

- Absence of provocating factors like anger
- Presence of prolonged altered sensorium
- O Late onset of cyanosis
- Presence of baseline cyanosis
- Prolonged duration of cyanosis
- Presence of clubbing
- Prolonged tonic-clonic movements

### **Approach**

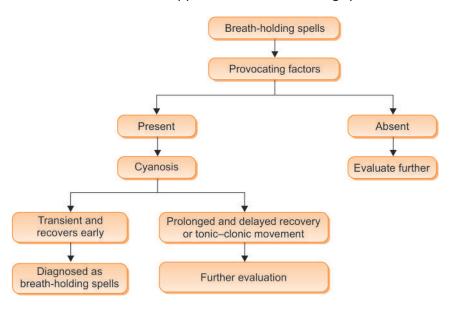
- O History related to age group
- O History of provoking factors
- Previous history of seizures
- O Details of cyanosis
- Occurrence of tonic-clonic movements
- Examination for clubbing in the hands
- Baseline pallor/cyanosis
- Neurodeficits
- O Cardiac examination

### **Algorithm**

- O *Diagnosis*: Detailed clinical description is sufficient to make a diagnosis most of the time. Workup for iron deficiency must be done.
- An electroencephalogram (EEG) is indicated only if the manifestations are not classical.

• The algorithmic approach to the management of breath-holding spells is given in **Flowchart 1**.

**FLOWCHART 1:** Approach to breath-holding spells.



## **Suggested Reading**

- O Gupta P (Ed). UG Textbook of Pediatrics. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2023. pp. 84-5.
- O Gupte S (Ed). The Short Textbook of Pediatrics, 13th edition. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2020. p. 107.
- O Gupta P, Menon PSN, Ramji S, Lodha R (Eds). PG Textbook of Pediatrics, 3rd edition. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2022. pp. 766-7.