Orthostatic Hypotension (Postural Hypotension)

Characteristics: Orthostatic hypotension (OH) is caused by blood pooling in the lower extremities when people stand up, causing less blood flow to the brain and consequent dizziness. Usually caused by medications that block the alpha-1 receptors, which are responsible for telling the body to constrict blood vessels (and maintain blood pressure) after standing up. Patients will report feeling faint when they get up, and occasionally a sense of the room spinning (vertigo).

Meds That Cause It: Antipsychotics, especially clozapine, risperidone, quetiapine, and lower-potency first-generation agents. Antidepressants, especially tricyclics, MAOIs, trazodone, sometimes mirtazapine.

Mechanism: Alpha-1 receptor blockade, also anticholinergic effects.

General Management:

- Review all meds, including nonpsychiatric, since many blood pressure and cardiac meds, as well as alpha blockers like prazosin (Minipress) and tamsulosin (Flomax) used for benign prostatic hyperplasia, can cause OH.
- Start at lower dose and titrate more slowly, especially when using higher-risk agents in higher-risk patients.
- Change dosing to minimize peak blood levels (eg, split dosing or switch to an extended-release version).
- Instruct patient to stand up slowly.
- Prevent dehydration by drinking enough fluids.
- Use compression stockings, also known as TED stockings.
- Increase salt intake (if no hypertension).
- Limit alcohol use.

Medications:

- Fludrocortisone (Florinef) 0.1 mg daily; can ↑ by 0.1 mg/day increments weekly to 0.3 mg daily. SE: Hypokalemia. Use only in severe cases where other measures have not worked.
- Midodrine 10 mg three times daily. SE: Goose bumps, paresthesias. Use only in severe cases where other measures have not worked.

Clinical Pearls:

- OH is defined as a 20 mm drop in systolic pressure or a 10 mm drop in diastolic pressure within three minutes of a patient moving from lying to standing position.
- Ask patients when the symptom is worse; if it is worse an hour or two after taking the medication, it is most likely medication induced.
- More common and problematic in elderly; may contribute to fall risk.

Fun Fact:

A recent epidemiologic observational study out of Johns Hopkins, following nearly 12,000 individuals over 20 years, recently suggested that OH in middle age increases risk of cognitive decline and later dementia.