News from Atlantic-Pediatrics.com.

This medical information is designed as an aid only for our own patients. It is not a substitute for a medical exam and direct advice from your physician.

BREATH-HOLDING SPELLS

Breath-holding spells typically occur when your child has fallen down or is suddenly frustrated, angry, or scared. The child may make one or two cries and then hold his breath until he becomes blue around the lips and then passes out (some children may have a few twitches or muscle jerks), but then resumes normal breathing and becomes fully alert in less than 1 minute. Breath-holding spells begin between the ages of 6 months and 2 years. They occur only while the child is awake.

Breath-holding spells are caused by an abnormal reflex that allows 5% of children to hold their breath long enough to pass out. Most children do not do this deliberately. Holding the breath (when frustrated) and becoming bluish without passing out is so common in young infants that it is not considered abnormal.

Breath-holding spells usually occur from one or two times a day to one or two times a month. Children usually stop having breath-holding spells by the time they are 4 or 5 years old. Breath-holding spells are not dangerous, and they don't lead to epilepsy or brain damage. These attacks are harmless and always stop by themselves. Time the length of a few attacks, using a watch with a second hand. Better yet, record the attack on your cell phone or video camera if you have one.

During an attack your child should lie flat rather than be held. This position will increase blood flow to the brain and may prevent some of the muscle jerking. Put a cold wet washcloth on your child's forehead until he starts breathing again. Don't put anything in your child's mouth because it could make him choke or vomit.

After attacks of breath-holding give your child a brief hug and go about your business. A relaxed attitude is best. If you are frightened, don't let your child know it. If your child had a temper tantrum because he wanted his way, don't give in to him after the attack.

Most attacks from falling down or a sudden fright can't be prevented. Neither can most attacks that are triggered by anger. However, if your child is having attacks every day, he probably has learned to trigger the attacks himself. This happens when parents (or grandparents!) run to the child and pick him up every time he starts to cry, or when they give him his way as soon as the attack is over. Avoid these responses and your child won't have an undue number of attacks.

CAUTION: Call a rescue squad (911) if your child has a different kind of attack during which he stops breathing for more than 1 minute or turns white (not blue).

New medical research indicates that there may be a link between breath-holding spells and iron deficient anemia. Until we know more, it would seem reasonable to give your child a children's chewable vitamin with iron (Flintstones, Bugs Bunny, and others) twice a day for one month. Caution: these vitamins with iron can cause severe poisoning if taken by the child in a large amount at once. Keep them (like all medicines) locked up and high up.

Rev. 03/2021 BREATHHOLDING.doc

Back to Home Page | Back to Library