

Children's Emergency Department



Breath-holding attacks - parent/carer discharge Information

The cause of breath-holding attacks is not known, but it is very common in toddlers and can sometimes occur in young babies. They usually start before 18 months of age and stops by six years. It may happen after a child has a minor accident, has a fright, or gets upset. The child will cry and hold their breath. Breath-holding attacks vary in severity and frequency according to each individual child.

There are two types of attacks:

- Blue spells are the most common type. The child starts to cry after anger, frustration, pain, or fright. They hold their breath and turn red in the face followed by turning blue, especially around the mouth. This lasts a short time - the child goes limp / passes out or may even fall to the ground. On rare occasions, a child may have a very brief fit (seizure) during a blue spell.
- Pale spells are less common. They can occur very early in life and can be frequent and are often frightening to watch. They also occur after the child has an upset such as a minor accident. The child opens their mouth to cry but nothing comes out, they then go limp/fall to the ground or become floppy and can look very pale. They may have a brief seizure/fit. The child may recover quickly or may be drowsy and sleep for a little while.

No special treatment is required as there is no underlying illness. It is important that the child is not treated in a special way or differently from their siblings. These attacks do not cause any short-term or long-term harm and these children are not epileptic, although they may be prone to fainting when older.



Patient Information

If your child has another attack:

- Lie them down on their side - **do not** shake them or put anything in their mouth
- Keep their arms and legs from hitting anything hard
- Treat them normally after the event, do not punish or reward them

When should I seek medical advice?

- Your child loses consciousness and becomes very pale without any provoking factors
- The attack is then followed by prolonged stiffening or shaking which goes on more than a minute and is associated with slow recovery, extreme drowsiness or remaining confused for a long period of time

For further advice/information

- Call 111 (24 hours a day)
- Contact your GP

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact 024 7696 6934 and we will do our best to meet your needs.

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