Postural Orthostatic Tachycardia Syndrome (POTS)

Postural Orthostatic Tachycardia Syndrome (POTS) is a disorder of the autonomic nervous system, which regulates involuntary bodily functions such as blood pressure, digestion, and heart rate. Symptoms include tachycardia, dizziness, fatigue, cognitive and digestive issues. It predominantly affects young women of childbearing age.

School absence patterns

- No data; clinical estimates only
- Absence pattern typically intermittent and indefinite in length
- Mild: Partial attendance with shortened days/breaks
- Moderate: Sporadic attendance with frequent absences
- Severe: Extended withdrawal, relying on online education/no schooling







Health condition

- Chronic condition with no current cure
- Tachycardia (rapid heart rate) upon standing
- Dizziness, fatigue, gastrointestinal issues, cognitive impairment
- Triggered by viral infections, hormonal changes, physical or emotional stress
- Symptoms fluctuate, impacting daily life unpredictably
- Commonly co-exists with Autism
- High rates of anxiety and depression

• Absence duration can often exceed 1–3 months



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Challenges for students

- Attention, concentration, and memory problems
- Increased vulnerability to other stressors or illnesses
- Academic under-achievement
- Reduced opportunities for social support
- Social isolation and difficulty forming and maintaining relationships
- Increased anxiety
- Specific learning needs



Challenges for families

- High stress from POTS chronic nature, diagnostic delays and caregiving
- Parents (mainly mothers) reduce work; 8% quit jobs
- 56% borrow money for medical/caring costs
- Misdiagnoses and dismissed symptoms erode trust in healthcare
- Social engagement restricted
- Difficulty explaining condition and advocating for accommodations
- Siblings can feel neglected

Student population

Approximately **800,000 to 1 million** Australians live with POTS

POTS symptoms in **6.8% of adolescents** indicated

Predominantly **affects girls and women** in reproductive years

6% of females and **3.5% of males** develop POTS after COVID-19 infection

Gender bias delays diagnosis; **70% misdiagnosed as anxiety** and many as eating disorders

"Adolescents with POTS are especially vulnerable. They often face gaslighting, struggle to explain their condition, and feel the need to constantly defend themselves. Without a strong sense of agency, their fragile social and educational connections are at risk, leading to compounding mental health



What schools should know

- Students may appear healthy but suffer from debilitating POTS symptoms
- Symptoms, environmental factors, anxiety, and stigma can worsen their condition and impact attendance
- Effective communication between school, parents, and healthcare providers is crucial
- Awareness helps peers and friends connect better with students with POTS
- Siblings' school experiences and attendance may also be affected
- Provide flexibility in attendance and participation, and access to cool, quiet spaces
- Develop individualised learning plans collaboratively with parents and healthcare providers
- Support remote or hybrid learning options, including two-way digital connections
- Educate staff about POTS conditions and associated challenges

challenges from isolation and withdrawal."



Australian POTS Foundation

Supports POTS patients by funding research, raising awareness, and providing resources to improve care and understanding across Australia.

www.potsfoundation.org.au