

Midodrine cuts recurrent syncope in young, healthy patients

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midodrine had a longer time to first syncope (hazard ratio, 0.59). Both groups had similar adverse effects.

"Midodrine is effective in reducing the likelihood of a syncope recurrence in younger [patients](#) with frequent syncope when it is administered in conjunction with guideline-directed teaching about lifestyle risk reduction," the authors write.

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(HealthDay)—For patients with recurrent vasovagal syncope and no serious comorbid conditions, midodrine can reduce the recurrence of syncope, according to a study published online Aug. 3 in the *Annals of Internal Medicine*.

Robert Sheldon, M.D., Ph.D., from the University of Calgary in Alberta, Canada, and colleagues examined whether midodrine can prevent [vasovagal syncope](#) in a [randomized trial](#) involving patients with recurrent vasovagal syncope and no serious comorbid conditions. A total of 133 patients ([median age](#), 32 years; 73 percent female) with a median of six syncope episodes in the previous year were randomly assigned to either placebo or midodrine in a 1:1 ratio.

The researchers found that fewer patients receiving midodrine had at least one syncope episode compared with those receiving placebo (42 versus 61 percent; relative risk, 0.69). The absolute risk reduction was 19 percent and number needed to treat was 5.3. Patients receiving

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