Results from the surveys are encouraging so far in terms of acceptability of telephone consultation in the context of a pandemic. All results have not yet been recorded; hence they cannot be fully analysed at this time.

**Conclusion**
The data collected from this sample of patients supports the safety of telephone consultation for initial assessment in outpatient paediatric cardiology during a pandemic. It also supports the extrapolation of results to a period when normalcy is established.

### Abstract 1274

#### SEVERE POTS (POSTURAL ORTHOSTATIC TACHYCARDIA SYNDROME)

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**Aims**
To discuss the presentation, management, and outcome of a group of patients presenting with severe symptoms of POTS (Postural orthostatic tachycardia syndrome). Severe POTS is a new term used to describe a group of patients who are typically adolescents, without pre-existing chronic fatigue syndrome who present with disabling symptoms of dizziness and often need inpatient management.

**Methods**
We reviewed the case notes of 3 patients who presented with severe POTS and were admitted as inpatients. Exclusion criteria were patients with known chronic fatigue syndrome or functional disorders.

**Results**
The 3 patients included 2 boys and 1 girl between the ages of 13-15 years. They all presented with severe dizziness which made it difficult for them to stand and walk. Their symptoms were of acute presentation and distressing which needed inpatient management. Their overall neurological examination was normal but they all had a significant rise in heart rate (>40bpm) from lying to standing. There were no features suggestive of underlying vestibular neuritis. They had generally normal blood chemistry apart from one patient having a low vitamin D level. One patient was treated with saline infusion and all patients were treated with medications that helped resolve their symptoms rapidly. The patients were discharged after 24 to 72 hours and have remained well controlled with some patients continuing on medications. All patients had a positive tilt test for POTS which was done a few months after their admission.

**Conclusion**
Severe POTS is a previously undescribed entity that presents typically in adolescent patients with severe disabling dizziness which prevents mobility. Patients with preexisting chronic fatigue syndrome and functional disorders should be excluded. This patient group has normal neurology with no evidence of vestibular symptoms. All patients had a significant rise in heart rate on standing and were symptomatic in the upright posture. These patients often show a good response to appropriate management with fluids and medications. There is a need for more information regarding this form of presentation, its management, and its overall outlook.