

Drink Normalyte hydration solution (safe for mast cell patients) – order via <https://normalyte.com/>, Amazon, and CVS

High salt intake - 10 gm daily (use salt tablet if needed).

Hydrate well - 3 liter of water per day.

Wear compressive wear such as support stockings and upper body wear from Under Armour

Exercise with recumbent cycling and swimming.

Take vitamin D 5000 units and B1 100 mg daily

Check lactulose breath test to see if antibiotics or herbal antimicrobial are needed to treat small intestinal bacterial overgrowth.

Trial on low dose naltrexone.

If there is a concern for mast cell involvement, start specific therapies.

Do vagal maneuvers: <https://selfhacked.com/blog/28-ways-to-stimulate-your-vagus-nerve-and-all-you-need-to-know-about-it/>

Cardiology evaluation and treatment for tachycardia and low volume problem:
many medications can be effectively used

If there is an autoimmune cause for POTS: consider CellCept, methotrexate, mercaptopurine, or trial on steroids - if not better. If mercaptopurine is considered obtain the methyltransferase level first to see if it can be metabolized. If CellCept is considered obtain JC virus blood test first since rare neurodegenerative disease has been associated with this immunosuppressor. When using immune-suppressors obtain safety blood tests monthly.

For severe POTS, consider immune therapy plus intravenous immune globulin (often difficult to get approved by insurance – more likely to get approval if there is dependent hives - urticaria). This is an intense therapy but can be life-altering.