ELECTROCARDIOGRAPHIC CASE

BROAD COMPLEX TACHYCARDIA – SUPRAVENTRICULAR WITH ABERRANCY OR VENTRICULAR TACHYCARDIA?

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CASE REPORT

MN, a 24-year-old Malay man was admitted with complaints of palpitations. He had a history of intermittent palpitations for the previous few months prior to admission. The palpitations were described as a rapid racing of the heart, lasting for a few minutes usually. They were precipitated by exertion such as playing football. There was no history of chest pain or syncope during the tachycardia. He had no past history of heart diseases and there was no family history of sudden death. He had no past history of note except for a duodenal ulcer in 1988 which had been treated. On admission, he was hemodynamically stable with a heart rate of 115/min and a blood pressure of 120/70 mm Hg. The cardiovascular examination showed that the apex beat was not displaced and the first and second heart sounds were normal. There was no murmur or click heard. The respiratory system was normal. The 12 lead ECG during tachycardia is shown in Fig 1. Carotid sinus massage was done and the patient converted to sinus rhythm. The ECG post conversion is shown in Fig 2.

What is your diagnosis? (Answer on Page 95)

SINGAPORE MED J 1992; Vol 33: 82

Fig 1 - 12 lead electrocardiogram during tachycardia

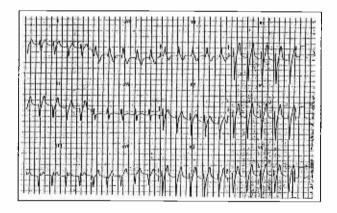
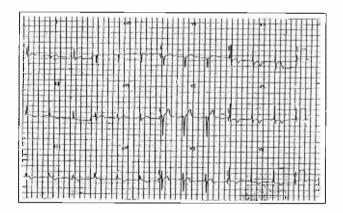


Fig 2 - 12 lead electrocardiogram after conversion to sinus rhythm



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