Ventricular tachycardia?

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A 59-year-old patient presented with “suspicion of ventricular tachycardia” because of “abnormalities in the long-term ECG” (Figure. 1). Cryoablation of the slow path had already taken place beforehand, in the case of slow-fast atrioventricular nodal reentry tachycardia.

The ECG on the ward showed no evidence of long or short QT (cQT time of 430 ms), a heart rate of 86 / min with sinus rhythm.

A more detailed anamnesis of the event showed that the patient was operating an electrical mixer at the time of the said ventricular tachycardia and was completely asymptomatic.

The family doctor's long-term EKG also showed a hidden sinus rhythm (Figure. 2). Furthermore, these artifacts only show up in the limb leads, not also in the chest wall leads.

The use of any small electronic device that emits strong vibrations can be a disruptive factor in the diagnosis of intermittent tachycardias.

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Figure 1: GP long-term ECG

Figure 2: More detailed analysis of the family doctor's long-term ECG