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IMAGES IN EMERGENCY MEDICINE

Prolonged sinus arrest in an asymptomatic woman

Simon D Robinson, Steve Murray

A 36-year-old woman in the second trimester of pregnancy attended the emergency department complaining of palpitations which were thought to be due to isolated ventricular ectopy. Routine examination, 12 lead electrocardiogram (ECG), transthoracic echocardiogram and ventilation perfusion scan were normal. Ambulatory ECG monitoring showed a 9.3 s pause while sleeping (fig 1) and the patient was referred urgently for pacing. The patient reported no symptoms attributable to bradycardia and all other investigations were normal. We suspected vagal over-activity and reassured the patient. Repeated Holter ECG monitoring post-partum did not demonstrate any bradyarrhythmias or other evidence of conduction disease. Arrhythmias including sinus arrest are described in healthy individuals during sleep and asymptomatic nocturnal bradycardia does not usually mandate pacing.¹

This young woman was referred for urgent pacing on the basis of a prolonged sinus pause during ambulatory ECG monitoring. Full consideration of her clinical status prompted us to manage her conservatively, and on follow-up she has remained well without symptoms.

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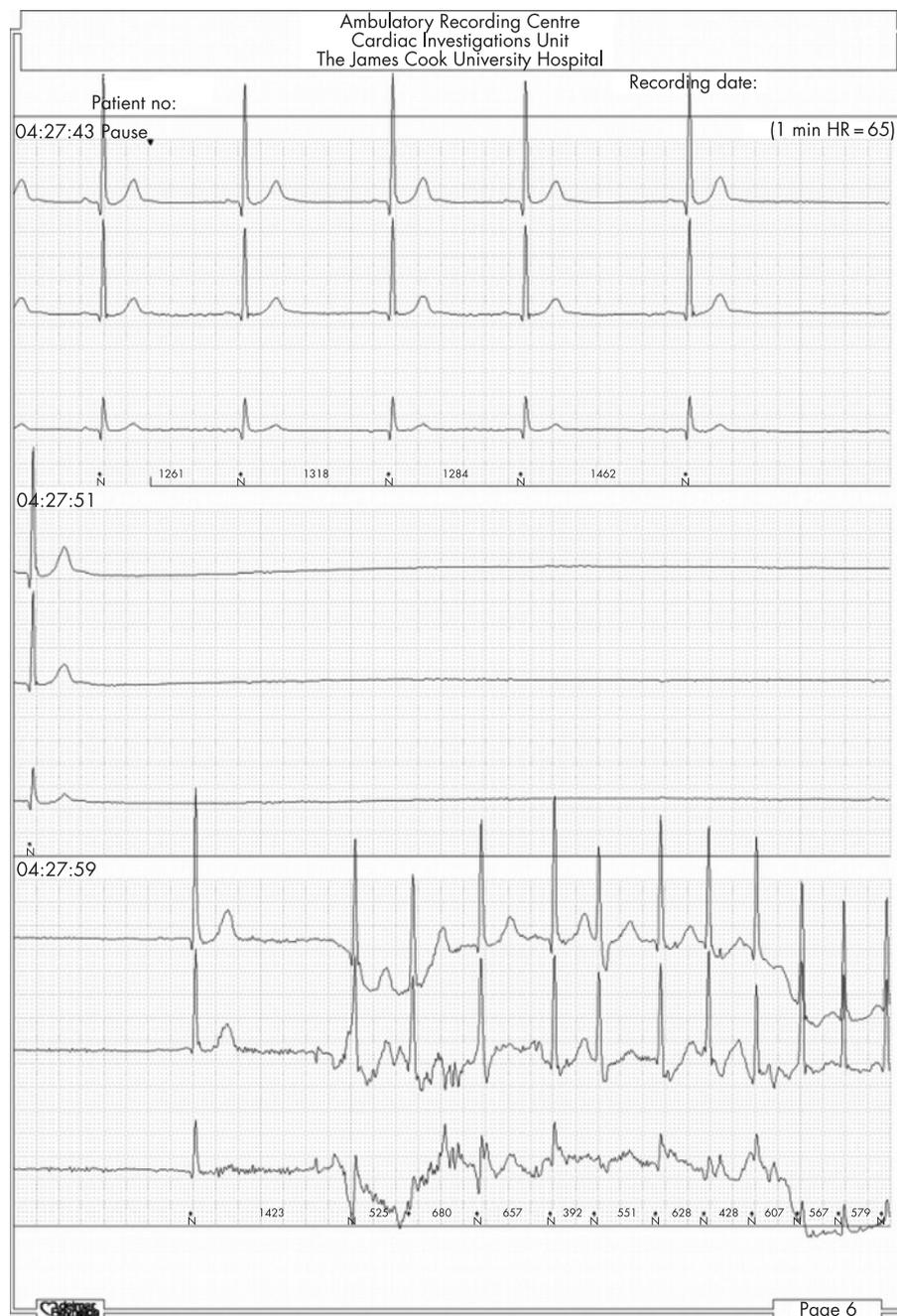


Figure 1 ECG tracing taken from ambulatory Holter monitor showing a 9.3 s sinus pause (while sleeping, asymptomatic).



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