



A 72-year-old man with a history only of hypertension and diabetes, presented to the outpatient department with dyspnoea, dizziness and palpitations for four days. This was the first time he had experienced these symptoms. His medications: methyldopa and metformin. On examination – not acutely distressed at rest; pedal oedema; pulse rate 144; BP 179/90; JVP elevated + 5cm; cardiac auscultation: S1 and S2 only; chest bilateral lower zone crackles. An ECG was recorded.

QUESTION 1: Which ONE of the following is the best ECG diagnosis?

- a) The underlying rhythm is atrial flutter with variable AV block.
- b) The rhythm is atrial fibrillation with a rapid ventricular response rate.
- c) The ECG shows a rapid multifocal atrial tachycardia (MAT).
- d) Pre-excited atrial fibrillation.

QUESTION 2: Which ONE or MORE of the following management options would you definitely recommend?

- a) Electrical cardioversion now.
- b) Intravenous amiodarone.
- c) Intravenous verapamil.
- d) Intravenous adenosine.
- e) Intravenous digoxin.
- f) Oral amiodarone.
- g) Atenolol.
- h) Furosemide or similar.
- i) Ablation of cavo-tricuspid isthmus for atrial flutter.
- j) Ablation of AV node and implantation of pacemaker.
- k) Pulmonary vein isolation ablation.
- l) Aspirin.
- m) Anticoagulation: warfarin or dabigatran.

Please analyse the ECG carefully and commit yourself to an answer before checking the explanation.

ANSWER on page 280

ERRATUM ECG QUIZ NO. 24

A printing error occurred in ECG Quiz No. 24, published in 2011, volume 8, issue 3, page 194.

The heading should read: **HOW CAN THIS BE CONFIRMED?**