Title: Appropriate Localisation of Epicardial Accessory Pathway of WPW Syndrome-Initial Step to Success

Ramachandra Reddy VJ*, Chidanand GC and Manjunath CN
Department of Cardiology, Sri Jayadeva Institute of Cardiovascular Science and Research, India

Figure 1: ECG Showing positive delta waves in leads I, AVL, V1-V6 and deeply negative delta wave in lead II.

Subepicardial posteroseptal accessory pathways, which consist of accessory pathway (AP) required ablation from within the subepicardial venous system, including the middle cardiac vein and other coronary veins [1]. As the electrocardiogram (ECG) algorithm accurately localizes accessory pathways prior to ablation, it may help the physician advice the patient regarding the likelihood of success and complications of the procedure. The ECG algorithm may aid selection of patients in whom coronary sinus angiography should be performed in order to delineate its anatomy, thus allowing mapping in the coronary veins and anomalous structures of the coronary sinus. A negative delta wave in lead II identifies the subepicardial posteroseptal accessory pathway as per Arudas criteria [2]. We report a Electrocardiogram manifest of classic subepicardial pathway arising from middle cardiac vein.

We report a 50 years old lady presented with history of recurrent palpitations of 2 years duration. No past history of any cardiac disease. Baseline ECG (Figure 1) showed evidence of pre-excitation with positive delta wave in leads I, AVL, V1-V6 with negative delta wave in leads II, III, AVF. A distinctive ECG clue for the presence of an epicardial AP was a steeply negative delta wave in lead II. Electrophysiological studies confirmed subepicardial pathway arising from middle cardiac vein and successful ablation of the pathway done. Since we localized the pathway as epicardial pathway on ECG by applying Arudas criteria, coronary venous sinus angiography done and ablated by left sided approach by transseptal puncture, stressing importance of ECG localization.

References


*Corresponding author: Ramachandra Reddy VJ, Resident of Cardiology, Sri Jayadeva Institute of Cardiovascular Science and Research Bangalore, Karnataka, India, Tel: 0821 2421500; E-mail: Dr.Vijaykumarjr@gmail.com

Copyright: © 2014 Reddy et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.