

Utility of patient-activated cardiac event recorders in the detection of cardiac arrhythmias.

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摘要

Abstract

Background: Patient-activated event recorders are useful for the diagnosis of arrhythmia in patients with palpitation and presyncope. However, the utility of event recorders in patients suspected of arrhythmia but presenting with other symptoms is not clear. Furthermore, the factors influencing their utility have not been evaluated.

Methods: Event recorder reports of six hundred and sixty consecutive patients referred due to clinical suspicion of cardiac arrhythmia were reviewed. We divided symptoms into four groups: palpitation, presyncope, chest tightness, and dyspnea. We calculated the diagnostic yield according to patients' symptoms reported on the record, and analyzed the factors affecting the utility of event recorders.

Results: The overall diagnostic yield was 64%, and those of palpitation, presyncope, chest tightness, and dyspnea were 66%, 57%, 51% and 60%, respectively. The most common five findings in our patients were sinus rhythm (36%), sinus tachycardia (30%), atrial premature complex (14%), ventricular premature complex (12%), and atrial fibrillation/atrial flutter (7%). The recording duration (8 ± 4 days) was short in the present study, but the overall diagnostic yield was similar to those of previous ones. Women had lower diagnostic yields than men, especially in atrial flutter-fibrillation. The diagnostic yield was not influenced by age, ordered doctors, or history of cardiovascular disease.

Conclusions: Patient-activated event recorders provided a good diagnostic yield in patients with different presentations of cardiac arrhythmia, and women had lower diagnostic yield in atrial flutter-fibrillation.