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[Can J Physiol Pharmacol](#). 2019 Jan 24. doi: 10.1139/cjpp-2018-0507. [Epub ahead of print]

Assessment and clinical relevance of the dynamic parameters of ventricular repolarization in patients with grade I left ventricular diastolic dysfunction.

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Abstract

Imbalance in ventricular repolarization parameters are related to increased risk of severe arrhythmia and sudden cardiac death. There is limited research regarding markers to detect patients at risk in this early stage. We aimed to assess the influence of grade I left ventricular diastolic dysfunction on repolarization parameters in asymptomatic patients. Ambulatory patients with grade I left ventricular diastolic dysfunction were studied and compared with a control group. We assessed: the QT dispersion circadian variation, heart rate variability in the time and frequency domains and dynamics of QT using a 12-lead Holter. In the diastolic dysfunction group 8 (30%) patients had QT dispersion >80 ms. One (3.8%) patient presented premature ventricular complex > 10/h. The comparison between the two groups showed that the difference between the standard deviation of normal-to-normal intervals and low frequency power in both groups was statistically significant. We therefore conclude that increased parameters of ventricular repolarization and depressed heart rate variability reflect an imbalance in autonomic responses in patients with grade I left ventricular diastolic dysfunction without cardiovascular symptoms enabling the identification of patients that are at a higher risk for cardiovascular events.

PMID: 30676775 DOI: [10.1139/cjpp-2018-0507](#)

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