

Ventricular Tachycardia

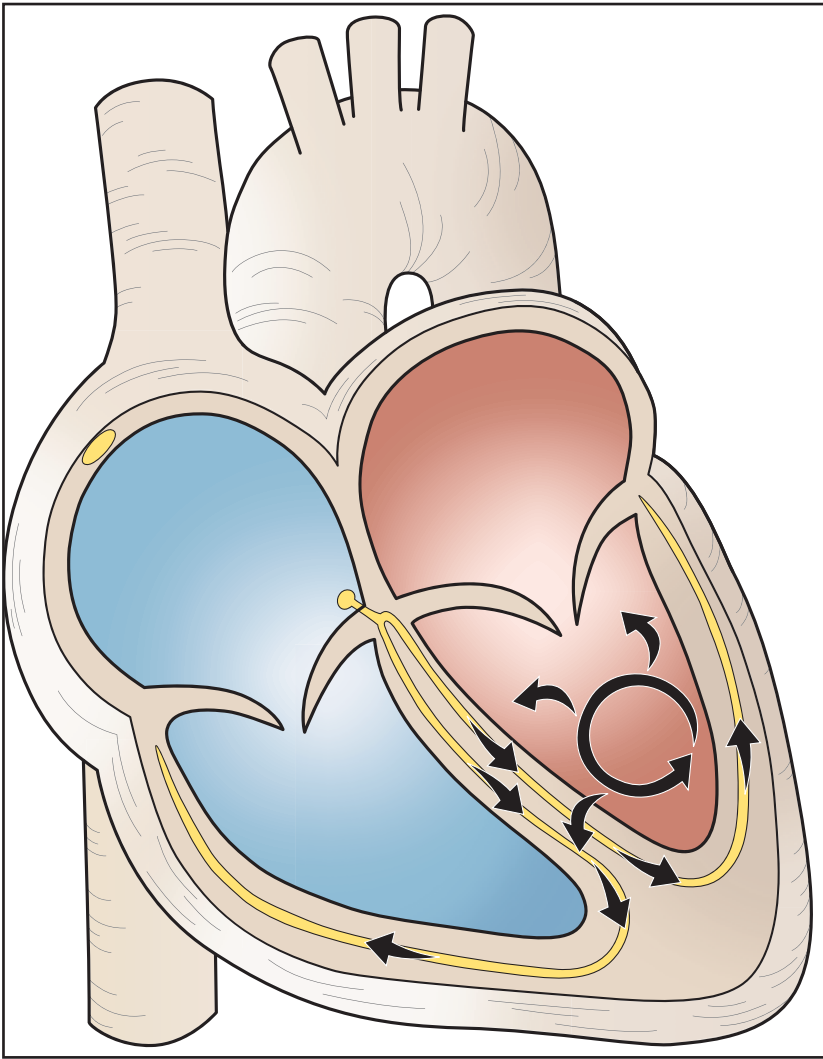


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Ventricular tachycardia is a rapid, regular beating of your heart ventricles.

General Information

Ventricular tachycardia is a rapid, regular beating of your heart ventricles. This may cause you to feel lightheaded or faint. You may feel rapid heartbeats. If it doesn't stop, you could lose consciousness.

If left untreated, this condition can be life-threatening.

Electrical Impulses

The heart is divided into four chambers:

- two upper chambers (atria)
- two lower chambers (ventricles).

The electrical impulse that causes a heart to beat begins in the sinoatrial (SA) node and goes down to the atrioventricular (AV) node.

From there, the impulse spreads through the ventricle. This causes a heart at rest to beat between 60 to 100 times per minute.

Why Ventricular Tachycardia May Happen

Ventricular tachycardia can affect anyone. You are at an increased risk if you:

- had a heart attack
- have disease of the heart valves
- have disease of the heart muscle
- had heart surgery
- have a side effect from antiarrhythmic medicines.

Symptoms of Ventricular Tachycardia

Symptoms of ventricular tachycardia include:

- a faster heartbeat than normal
- a sense of anxiety
- a tightness in the chest that won't go away
- feeling tired, rundown, or weak
- shortness of breath
- palpitations or racing of the heart
- feeling faint
- loss of consciousness.

How Ventricular Tachycardia is Found

Your doctor will listen to your heart and may give you an exam. Other tests you may have include any of the following:

- **an electrocardiogram (ECG):** This painless test can be done in your doctor's office. The ECG shows the electrical flow in your heart. This is recorded onto paper. If you have ventricular tachycardia at the time of the ECG, your doctor will be able to tell by looking at the rhythm.
- **a Holter monitor:** A Holter monitor helps determine how your heart responds to normal activity. A Holter monitor is a small, portable EKG monitor that records your heart rhythm nonstop. You wear the monitor for 24 to 48 hours.

While wearing the monitor, you will keep a diary of your activities and symptoms. Your doctor can compare this to your heart rhythm recordings.

- **an electrophysiology study:** This is a study of the heart's electrical system. This test is done at the hospital and involves placing catheters into blood vessels in your groin and neck.

The catheters are moved into your heart to get information about your arrhythmia.

Risks

The major risk is sudden cardiac arrest. This is a sudden loss of heart function caused by an abnormal heart rhythm. Your heartbeats can become irregular and your breathing can be affected.

Treatments

You may or may not need treatment. Treatment options your doctor may suggest include one or more of the following.

- **medicine:**
Antiarrhythmic medicines or beta blockers are used to slow your heart rate or keep it steady.
- **electrical cardioversion:**
This uses an electrical shock to return your heart back to a normal rhythm. This can be done with or without antiarrhythmic medicine. You may need to take blood thinners (medicine) before and after the procedure.
- **catheter ablation:**
This uses a special catheter to deliver high-frequency energy to change a tiny portion of heart tissue that is triggering the arrhythmia.
- **implantable cardioverter defibrillator:**
This device may be inserted in your chest if your heart has a life-threatening arrhythmia. The device monitors your heart and delivers a shock to restore the heart to a normal rhythm.