

EVALUATION OF CARDIAC CONDUCTION ABNORMALITIES AND ARRHYTHMIA IN PATIENTS WITH PULMONARY HYPERTENSION

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INTRODUCTION

Pulmonary hypertension (PH) is a potentially devastating clinical condition associated with remodeling and impairment of cardiac electric structures. Conduction disorders and arrhythmia are common complications of the disease marking the deterioration of the condition and requiring intense managing.

METHODS

- Retrospective study included patients treated in the LUHS Kaunas Clinics in 2020 – 2021.
- Inclusion criteria were age ≥ 18 years, diagnosis of PH, performed echocardiography. Patients were divided into groups according to the etiology and mechanism of PH.
- Data was collected on prevalence of conduction disorders and arrhythmia, echocardiographic measurements and biometrics

CONCLUSIONS

- The most common arrhythmia in the study population was AF.
- RBBB was the most common conduction disorder.
- Both conditions were associated with a significant cardiac remodeling in advanced stages of PH.

AIM

To evaluate the prevalence of conduction disorders and arrhythmia in pulmonary hypertension patients treated in the LUHS Kaunas Clinics during 1 year.

RESULTS

- The most common (28.4%) arrhythmia was atrial fibrillation. It depended on mechanism of PH: 65.2% were in precapillary group, 37.9% were in postcapillary group ($p=0.026$)
- Left atrium diameter (49.5 vs 38.8, $p<0.001$) and left ventricle end – diastolic volume index (26.3 vs 23.8, $p=0.018$) was higher in patients with AF.
- The most common conduction disorder was right bundle branch block (42%). It occurred in patients with a significantly enlarged right ventricles (49.0 vs 45.1, $p=0.034$).

Pulmonary hypertension causes

