

# بسم الله الرحمن الرحيم





# شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم





# جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

## قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها  
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



## يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار





# بعض الوثائق الأصلية تالفة







بالرسالة صفحات  
لم ترد بالأصل



*Alexandria University*

*Faculty of Medicine*

*Department of Critical Medicine*

**COMPARATIVE STUDY BETWEEN  
TRANSTELEPHONIC AND HOLTER  
MONITORING OF ARRHYTHMIA  
SURVEILLANCE IN SYMPTOMATIC  
PATIENTS**

*Thesis*

Submitted to the Faculty of Medicine, Alexandria University,  
in partial fulfillment of the requirements  
for the degree of Master of Critical Medicine .

*By*

*Mohammed Abdel Monheim Hegazy*

*(M.B.B.Ch., Mansoura University )*

*Resident at Emergency Hospital,*

*Faculty of Medicine*

*University of Mansoura*

**1998**

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*TO MY  
PARENTS, BROTHERS, SISTER,  
AND GRANDMOTHER*

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*Mohammed HEGAZY*

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## *Abberivations*

AF	Atrial Fibrillation.
APCS	Atrial Premature Contractions.
AVNRT	A.V nodal re-entrant tachycardia.
CAD	Coronary artery disease.
C.C.U	Coronary Care Unit.
CK	Creatine Kinase.
Cond.	Conduction.
C.M	Cardiomyopathy.
ECG	Electrocardiography.
H.B	Heart Block.
H.D	Heart disease.
HDL	High density lipoprotein.
HM	Holter monitoring.
LDH	Lactic dehydrogenase.
LDL	Low density lipoprotein.
P.S.V.T	Paroxysmal supraventricular tachycardia.
SVT	Supraventricular tachycardia.
TTM	Transtelephonic monitoring.
VT	Ventricular tachycardia.
VF	Ventricular Fibrillation.
VPCs	Ventricular premature contractions.
WPW	Wolf parkinson white syndrom.



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# Introduction

## ***INCIDENCE OF ARRHYTHMIA IN NORMAL POPULATION***

The development of dynamic monitoring has enable us to obtain information about the frequency with which abnormal rhythms are found in normal population .

Ventricular ectopy in the general population increase the risk of sudden cardiac death; In men the simple presence of ventricular ectopy was a predictor of sudden cardiac death. However, it is generally accepted that such ectopy in people without heart disease does not increase the likelihood of sudden cardiac death<sup>(1)</sup> .

As people age; there is an increase likelihood of ventricular ectopy developing <sup>(2)</sup>, and there is correlation between the frequency of ventricular premature depolarization, as detected in 24- hour Holter monitoring, and the likelihood of ventricular tachycardia developing <sup>(3)</sup> .

Cardiac arrhythmia have been shown to be frequent in small samples of elderly persons undergoing ambulatory electrocardiographic monitoring<sup>(4)(5)</sup>.

Although arrhythmia often occur in the setting of underlying cardiovascular disease, in the absence of known disease or symptoms they have not been shown to be associated with increased mortality <sup>(6)</sup>.

Complex ectopic activity in the presence of normal coronary arteries has been associated with left ventricular diastolic enlargement.



It was recognized that, ventricular arrhythmia may be markers of underlying or occult cardiovascular disease <sup>(7)(8)</sup>.

*\*\*Incidence of cardiac arrhythmia with acute myocardial infarction after discharge from coronary care unite :*

Cardiac arrhythmia are considered one of the serious complications of acute myocardial infarction. So, patients with acute myocardial infarction are admitted to coronary care unit aiming for early detection and prompt suppression of life threatening arrhythmia <sup>(9)</sup>. Continuous monitoring and aggressive management of rhythm disturbance during the initial period in hospital have significantly reduced mortality in these patients <sup>(10)</sup>.

After discharge from coronary care unit this monitoring is somewhat deficient. Patients who appear to be making a satisfactory recovery after myocardial infarction are still at risk of cardiac events, especially in the first 12 months <sup>(11)</sup>.

Sudden unexpected deaths occurring in hospital after discharge from coronary care unit have suggested that arrhythmia may be a continuing problem. The development of portable electrocardiographic monitoring has provided a means of continuous recording and assessment of cardiac rhythm in ambulatory patients <sup>(10)</sup>.