

Arrhythmia With an Exercise Test

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A 64-year-old man with known coronary disease presented to the hospital with sinus bradycardia, chest pain, and normal cardiac enzymes. During an exercise stress test he developed ventricular fibrillation that spontaneously resolved. © 2020 Elsevier Inc. All rights reserved. (Am J Cardiol 2020;131:125–126)

Case Report

A 64-year-old man with a coronary angioplasty 18 years earlier presented with chest pain and normal cardiac enzymes. The baseline electrocardiogram (Figure 1) shows sinus bradycardia and inferolateral T-wave inversion. The patient developed chest pain during exercise and then ST-segment depression in leads V₂ to V₅ at peak exercise. Subtle ST-segment elevation in the inferior leads became apparent in the early recovery period. The ST-segment elevation resolved, but then the patient developed ventricular fibrillation (Figure 2). He received chest compressions, and just before he was to be defibrillated electrically the ventricular fibrillation terminated spontaneously, and the patient was in controlled atrial fibrillation (Figure 3). The patient underwent emergent stenting of a 90% mid-RCA lesion. The left anterior descending had a 75% stenosis which was to be addressed later.

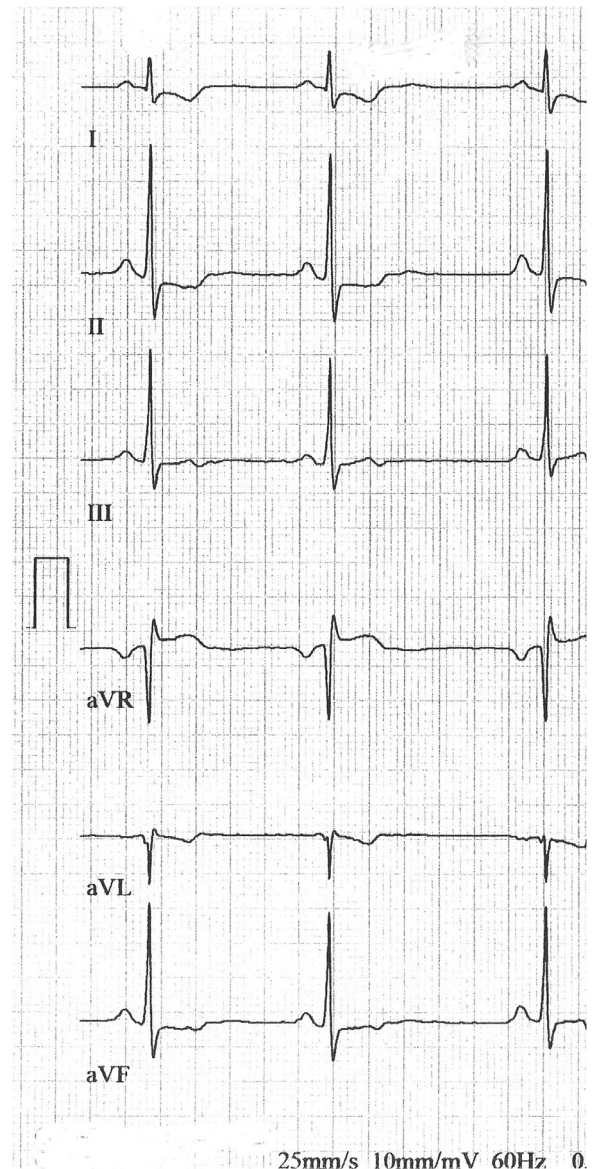


Figure 1. See text for explanation!

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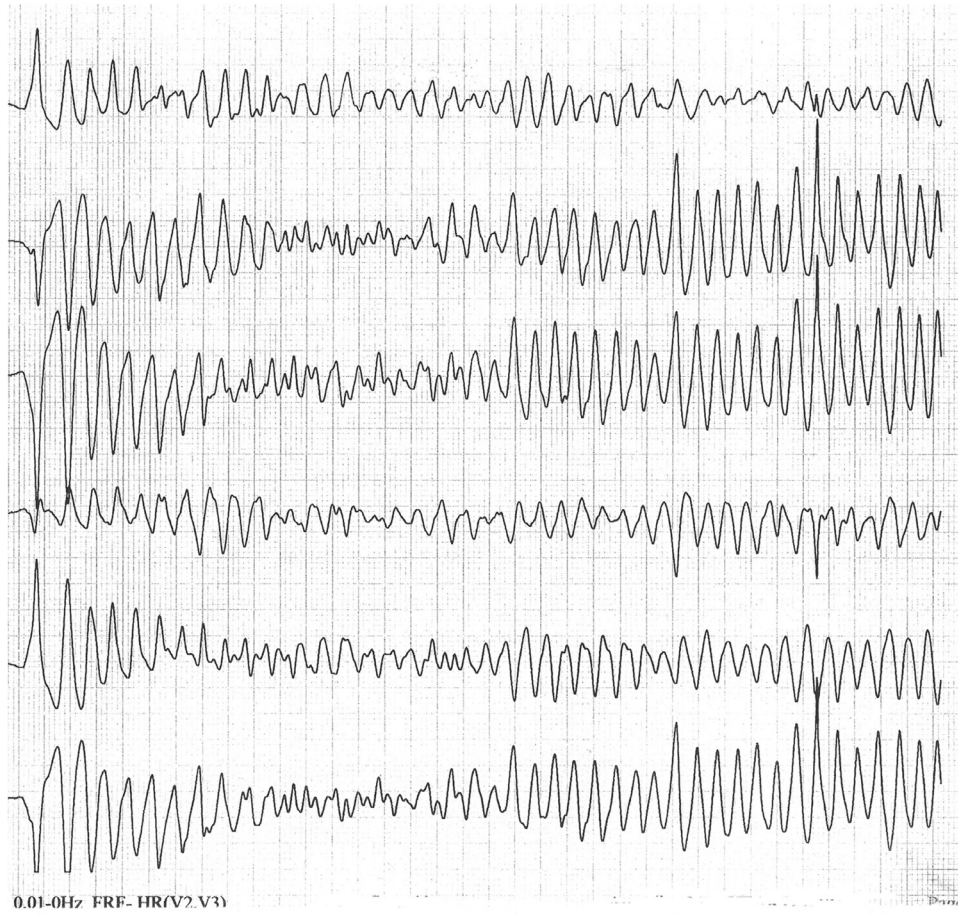


Figure 2. See text for explication!

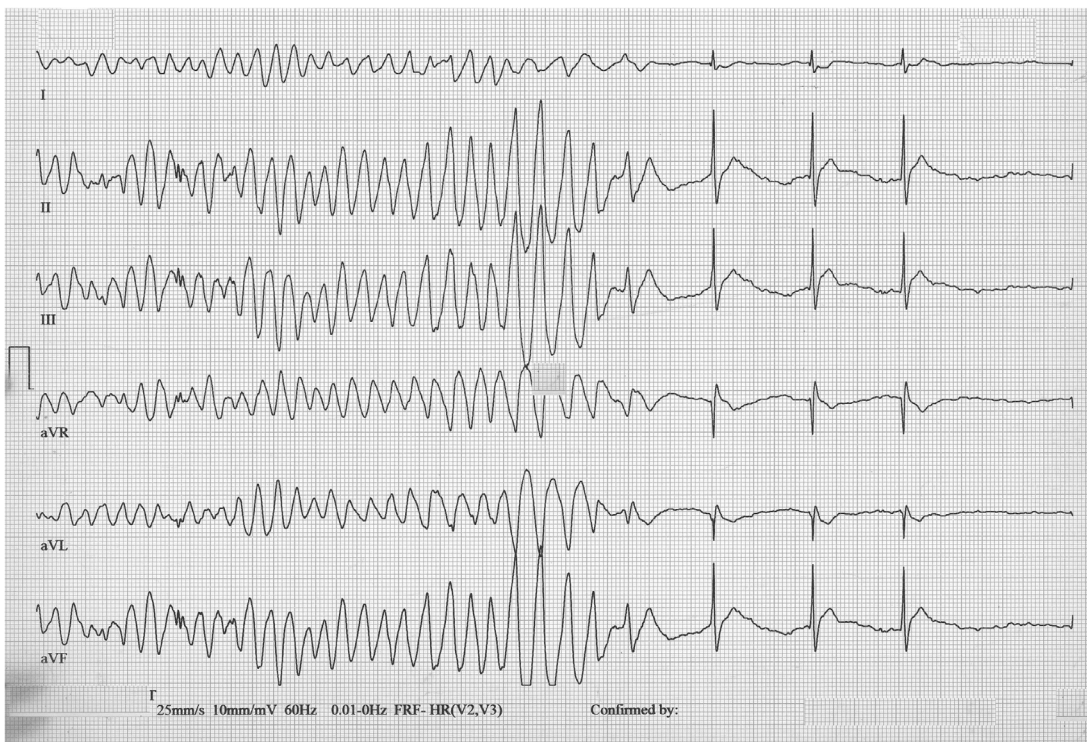


Figure 3. See text for explication!