A Wide QRS Tachycardia in a Young Patient: Does It Ring a Bell?

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A 29-year-old male presented with presyncope and palpitations. His previous medical history consisted of episodes of palpitations diagnosed as supraventricular tachycardias. He was treated with metoprolol and remained symptom-free for years. He had discontinued his medication 6 months previously. After that, several episodes of palpitations occurred, which could be terminated by Valsalva manoeuvres. There were no known risk factors for coronary artery disease and he had no family history of sudden death.

Physical examination was normal. The ECG, taken by emergency personnel, is shown in Fig. 1. There was spontaneous conversion to sinus rhythm. Then the ECG yielded normal findings.

Cardiological evaluation, including exercise testing, echocardiography and MRI revealed no structural cardiac disease.

What is your diagnosis and what would be your treatment of choice?

You will find the answer elsewhere in this issue.

Fig. 1 ECG recorded by emergency personnel

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