

Abstract No. **8**

Category: **Arrhythmias and Clinical EP**

Title: **Prevalence of Late Ventricular Potentials by Signal Averaged Electrocardiogram and its Association with Ventricular Arrhythmia and Late Gadolinium Enhancement in Patients with Chronic Chagas Disease**

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Abstract:

Background: Late ventricular potentials QRS (LVP) are associated with ventricular arrhythmia and sudden death in patients with ischemic heart disease; there is paucity of data in individuals with Chagas disease (CD). Also, there is no data in this population regarding the association of LVP and scar noticed by late gadolinium enhancement (LGE) in cardiac magnetic resonance (CMR)

Methods: Cross-sectional study determining the prevalence of LVP by signal averaged electrocardiogram (SAECG) in addition to LGE and left ventricular ejection fraction (LVEF) determination by CMR. We looked at the association of VLP with LGE and LVEF

Results: Sixty CD patients were included (mean age 63.4+/-SD 9.8; 33% male) in the study; the prevalence of positive LVP was 27% Of these, 40% had reduced LVEF (<40%) and 13% had an intermediate range (40-49%), as measured by CMR. There was no association between SAECG and LGE by CMR (OR: 1.33 IC 95% 0.74 - 2.38 p: 0.33), nor with ventricular arrhythmia (p: 0.7)

Conclusions: In patients with CD, a significant proportion had VLP and, almost half of these patients had reduced LVEF; on those without VLP, the majority had normal left ventricular systolic function and no evidence of LGE.