

Classical warm up phenomenon of atrial tachycardia

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The joint expert group defined focal atrial tachycardia as *being characterized by atrial activation starting rhythmically at a small area (focus) from where it spreads centrifugally*.¹ Here we report a 55-year-old male patient presented with paroxysmal palpitation: his 12-lead electrocardiogram (ECG) was suggestive of paroxysmal irregular narrow complex tachycardia, which spontaneously reverted to normal sinus rhythm (Figure 1). On initiation, tachycardia typically exhibits a warm up phenomenon during which atrial rate gradually accelerates after its initiation and slows prior to termination.² On first sight, ECG looked like atrial fibrillation because of its irregular rhythm, but this ECG nicely depicted a warm up phenomenon of automatic atrial tachycardia, which had a diagnostic value in this case. The slight difference in terms of RR cycles can also be seen in atrio-ventricular nodal reen-

trant tachycardia, and it has been attributed to a model of a *figure-of-8-reentry*, continuously crossing over the antegrade activation through an inferior input to the contralateral superior input via the atrioventricular node.^{3,4} Differentiation of narrow complex tachycardia on the basis of 12-lead ECG is difficult and requires further electrophysiological studies or pacing maneuvers.

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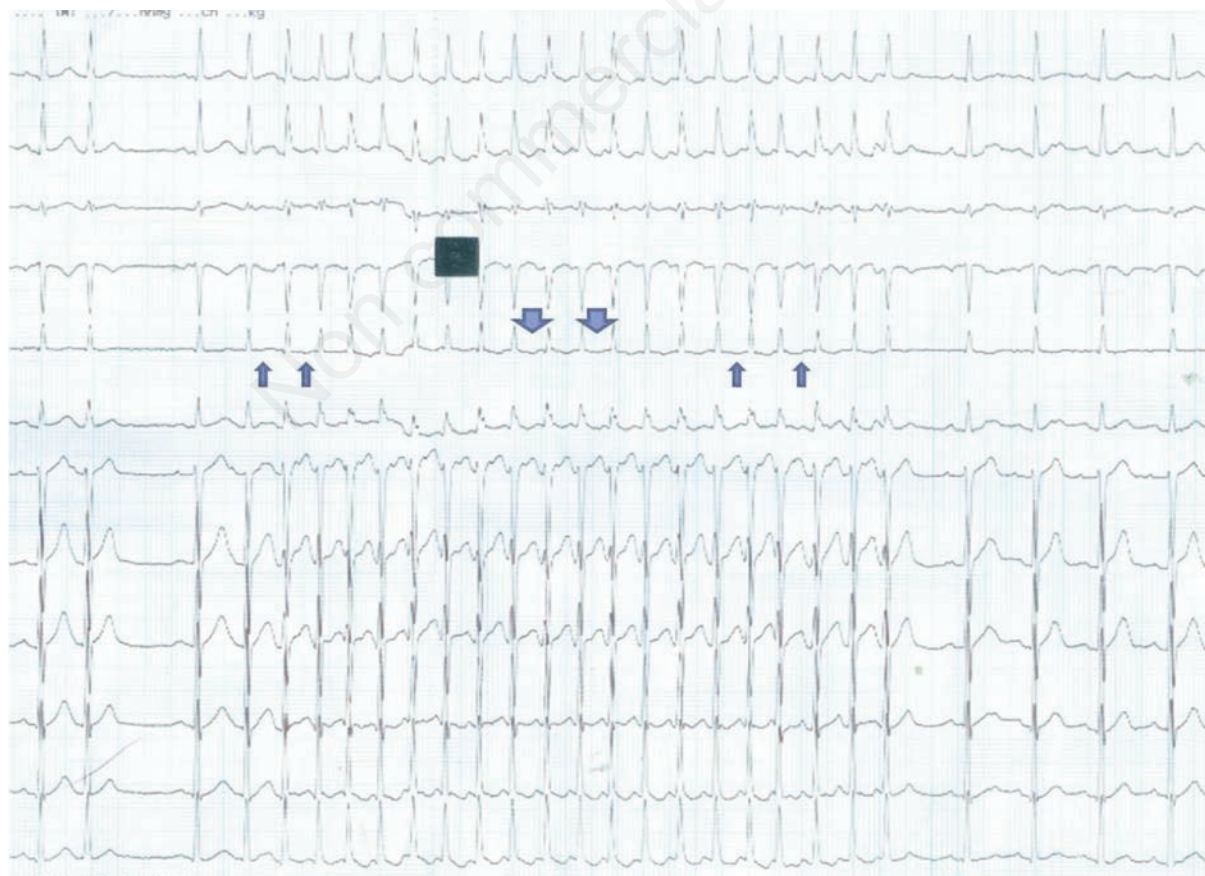


Figure 1. Electrocardiogram suggesting paroxysmal irregular narrow complex tachycardia.