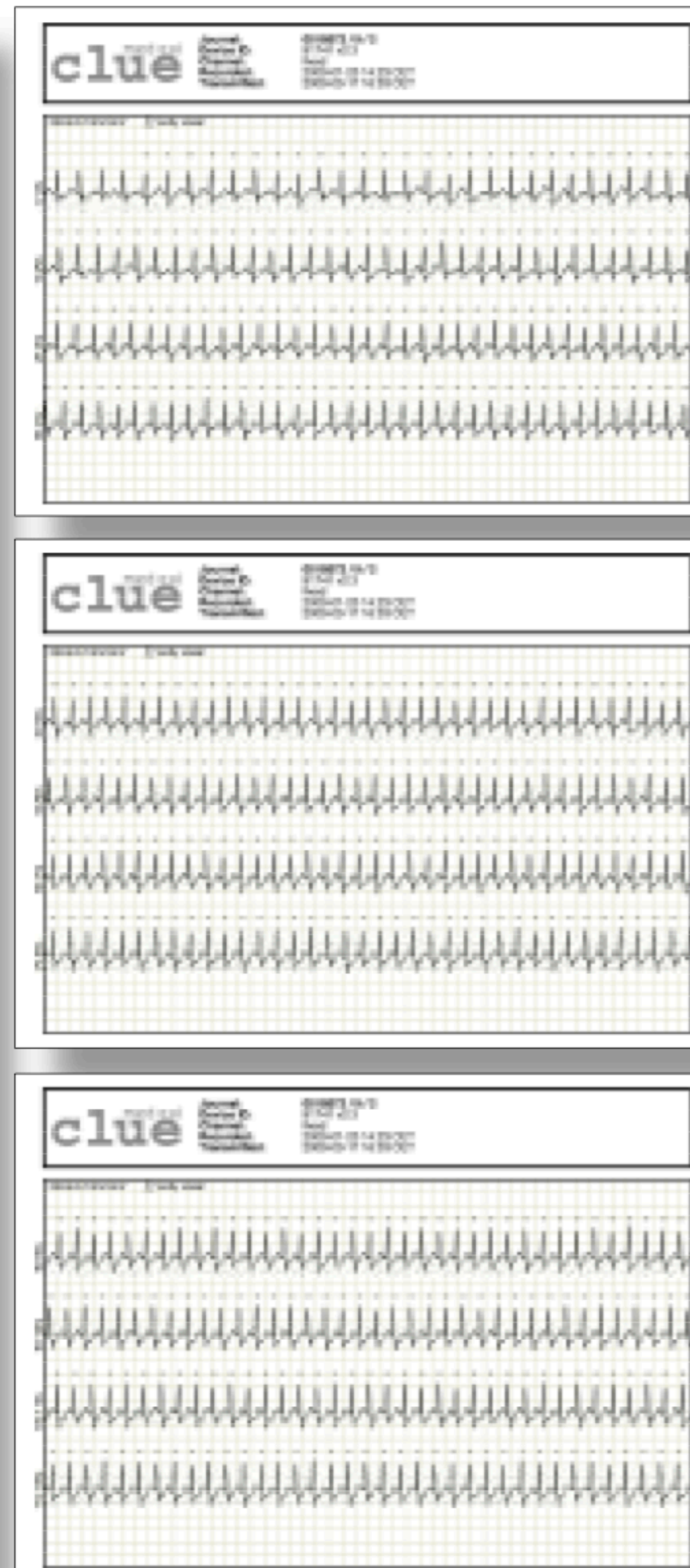
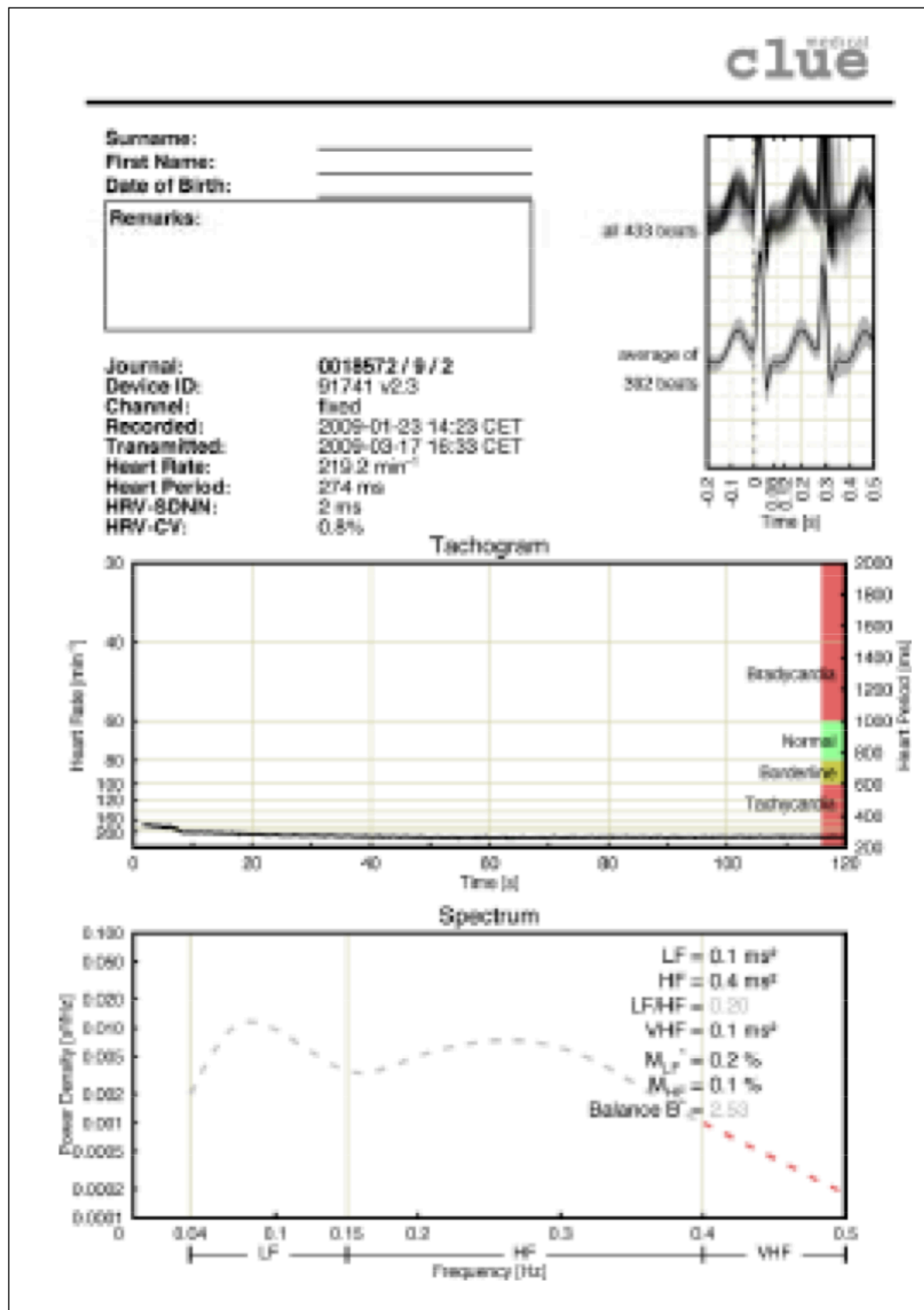


1. Tachycardia – event recording

Some patients often suffer from very fast heart rates up to several times per month. However, it has not been possible to document this because the cardiac dysrhythmia did not occur when the patient was in hospital or had a 24-hour ECG attached.

Case study:

The 32-year-old patient, M. E., reported the occurrence of tachycardia several times per month, usually lasting for just a few minutes.



All previous examinations, such as normal 12 lead ECG's and several 24-hour ECG's, as well as exercise ECG's, had so far not given any indication of the cause of the tachycardia. The patient nevertheless reported of a sudden start and end to the cardiac dysrhythmia, and specified that the heart began to beat "like mad".

Up to now, it was not possible to record this dysrhythmia. Using **clue medical**, it has ultimately been possible to successfully document several cases. Results show that the condition in question is a so-called narrow complex tachycardia, which requires good access to an ablation therapy.

The patient was admitted to hospital and the dysrhythmia was successfully treated by high frequency ablation. The patient has not suffered any dysrhythmia since.

The employment of clue medical

clue medical should be employed for all unexplained and hitherto undocumented dysrhythmia or cases of cardiac dysrhythmia. In this way, dysrhythmia can be detected earlier and better documented, and a targeted therapy (e.g. an ablation therapy) introduced.

In addition, it is possible distinguish this from other forms of dysrhythmia - such as atrial fibrillation.

