Background: Here we report an infant with incessant ventricular tachycardia (IVT) with successful control by radiofrequency catheter ablation (RFCA). Case Report: She was first documented supraventricular tachycardia (SVT) and WPW syndrome just after her delivery. Carteolol and digoxin was successfully control her SVT. She lost her consciousness and referred to the hospital at 7-month-old. Electrocardiogram showed incessant polymorphic wide QRS tachycardia with a rate of 380 bpm. Adenosine triphosphate, propranolol, landiolol, amiodarone and DC shock were used but unsuccessful to terminate her tachycardia. Increased dose of amiodarone, with the use of verapamil, landiolol and lidocaine transiently controlled her tachycardia. She was transferred to our hospital for RFCA of her tachycardia when she was 9-month-old. Electrocardiogram showed incessant polymorphic wide QRS tachycardia with a rate of 380 bpm. All the antiarrhythmic medications were discontinued, and RFCA was performed. There was no delta wave and retrograde ventriculo-atrial conduction by ventricular pacing. Tachycardia was initiated spontaneously, and confirmed that IVT. At least 3 types of VT were confirmed from left ventricular (LV) apex, LV anterior wall, and LV lateral wall. All the VTs were successfully controlled after 2 sessions of RFCA, and she was discharged on mexiletine. Conclusion: RFCA should be considered early in their life if the VT was refractory to antiarrhythmic medication. Keywords: incessant VT, ablation, infant