Characteristics and Management of Tachycardia in Neonates and Infants: Ten-Year Experience in Daegu

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The aim of this study was to evaluate the characteristics, management and prognosis of subjects with tachycardia on the basis of our ten-year experience. A total of 62 neonate and infants whose ECG showed tachycardia within the first year of life were enrolled. Thirty-five boys and 27 girls were admitted for management of tachycardia. Half of the patients had tachycardia attack in the first month of life (31/62), and most (51/62) had it within the first three months. In 41 patients who did not undergo OHS, SVT was the most common (20/41), the second was atrial tachycardia (AF and MAT, 15/41) and the remaining was VT (6/41). Almost half of them (18/41, 44%) was noticed incidentally, and 22% (9/41) and 30% (12/41) were noticed as fetal arrhythmia and subtle findings, respectively. In 21 patients who underwent OHS, JET was the most common (16/21) and sometimes resulted in hypotension. The first line therapy was cardioversion for AF, adenosine for SVT, amiodarone or conservative treatment for JET, and verapamil or cardioversion for VT. For the 29 patients, maintenance therapy began with antiarhythmics including beta blocker, digoxin, class I or III drugs. The duration of medication was median 26 months (2-75 month). Tachycardia did not recur in most of them after the first three months.

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