

ECG Contest

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The patient was 76 years old with recurrent vasovagal syncope and a mixed positive tilt table test. An AAIR<->DDDR mode pacemaker was implanted with minimum and maximum rates of 60 and 130 bpm, respectively, and an atrioventricular pacing interval of 150 ms, with a managed ventricular pacing algorithm. After implantation, the patient had felt well for a while but returned to the clinic with a new episode of syncope. The Holter trace is shown in the [Figure](#).

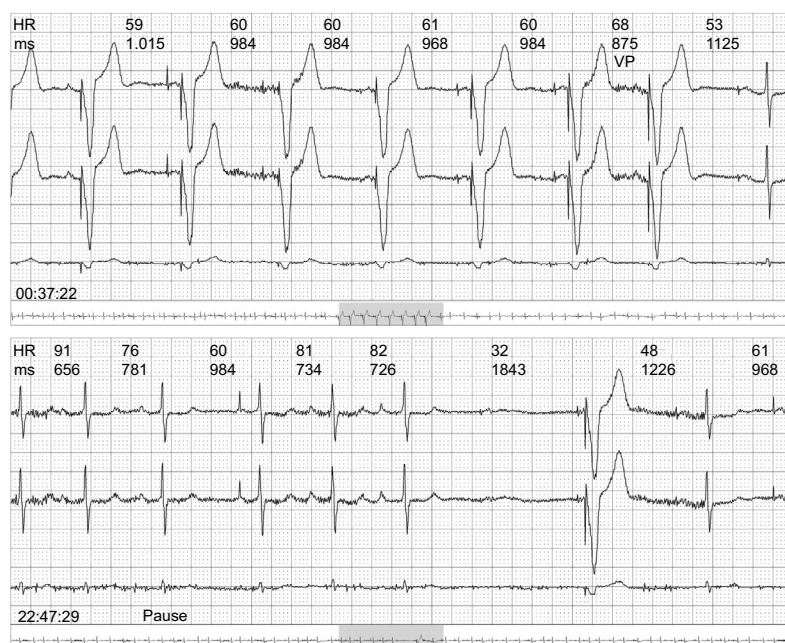


Figure.

What is the diagnosis and what is the most appropriate approach?

1. The syncope is related to failure of ventricular capture because the pacemaker lead has moved. The patient should be admitted immediately to hospital.
2. The syncope is probably unrelated, failure of ventricular capture has occurred, and the patient should be examined.
3. The syncope is probably unrelated, failure of atrial capture has occurred, and the patient should be examined.
4. The pacemaker is working correctly.

Suggest a diagnosis to this ECG contest at <http://www.revespcardiologia.org/es/electroreto/70/8>. The answer will be published in the next issue (September 2017). #EKGchallenge.

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