

# Adenosine insensitive “pseudo antidromic” atrioventricular re-entry tachycardia: The Duodromic tachycardia

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## Abstract

Manifest AP on the electrocardiogram (ECG) predispose patients to atrioventricular reentry tachycardia, atrial fibrillation (AF), malignant arrhythmias and sudden cardiac death. [1,2] The authors report a case of a male patient admitted to the emergency room (ER) with a wide QRS complex tachycardia with no response to antiarrhythmic therapy with adenosine. The arrhythmia terminated with amiodarone perfusion and basal ECG showed ventricular pre-excitation. An electrophysiologic study (EPS) was performed diagnosing two different accessory pathways (AP) which were successfully ablated. However, 6 months later the ECG showed recurrence of the ventricular preexcitation. A new EPS was proposed with successful ablation of a third AP.

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