BRUGADA SYNDROME

Tomislav Kostić¹, Zoran Perišić¹, Dragana Stanojević¹, Boris Đinđić¹, Goran Koračević¹, Vladimir Mitov², Viktor Stoičkov¹, Mlađan Golubović³, Snežana Ćirić-Zdravković¹, Sandra Šarić⁴, Valentina Mitić⁴, Marko Ristić⁵

Clinic of Cardiology, Clinical Center Niš, Serbia¹
General Hospital Zaječar, Department of Cardiology, Zaječar, Serbia²
Clinic of Anaesthesiology, Clinical Center Niš, Serbia³
Institute for Treatment, Prevention and Rehabilitation for CVD Niška Banja, Serbia⁴
Veterinary Institute Subotica, Serbia⁵
University of Niš Faculty of Medicine, Niš, Serbia⁶

Contact: Prof. Tomislav Kostić
Clinic of Cardiology, Clinical Center Niš, Serbia
Bul. dr Zorana Đinđića 81, Niš, Serbia
email: tomislav.kostic1977@gmail.com

In 1992, Brugada syndrome was introduced as a new clinical entity linking typical but variable ST segment changes in the right precordial leads to an increased vulnerability for lethal ventricular arrhythmias. The diagnosis of Brugada syndrome is based on clinical and electrocardiographic features. Recent studies illustrate the dynamic character of these ECG patterns. Whenever a large number of baseline ECGs was available during a follow-up, the diagnostic pattern could be documented only in approximately 25% of the tracings. Because the presence of the spontaneous coved type I ECG pattern is thought to be a useful predictor of future arrhythmic events in asymptomatic patients, these findings are of great clinical importance. ICD implantation is an option for the patients with Brugada syndrome and ventricular tachycardia or fibrillation. Extensive research is ongoing to find alternative pharmacological options for these patients, especially for patients in whom ICD implantation is contraindiicted for various reasons. Acta Medica Medianae 2015;54(2):37-40

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