#### SNS COLLEGE OF ALLIED HEALTH SCIENCE





#### **DEPARTMENT OF CARDIAC TECHNOLOGY**

**COURSE NAME:** Advanced Electrocardiography

**UNIT:** Basics Of Variants ECG

**TOPIC:** Left and Right atrial abnormalities

FACULTY NAME: Kavipriya S

## **Case scenario - Left and Right Atrial Abnormalities**



#### **Patient Profile**

• Name: Mrs. S, 45 years

• Occupation: Teacher

• **History:** Shortness of breath on exertion, occasional palpitations, fatigue for 6 months

• **Clinical Findings:** Mild pedal edema, systolic murmur over apex

• Investigations Ordered: ECG, Echocardiography, Chest X-ray

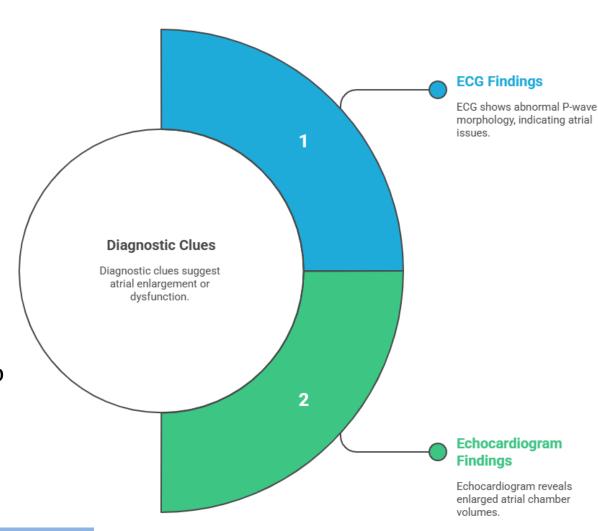
## **Empathize (Understanding the Problem)**



**Goal:** Understand the patient's symptoms, clinical background, and underlying cardiac function.

## **Patient Symptoms:**

- ✓ Dyspnea on exertion → suggests elevated atrial pressure or pulmonary congestion
- ✓ Palpitations → possible atrial enlargement leading to arrhythmia



## **Empathize**

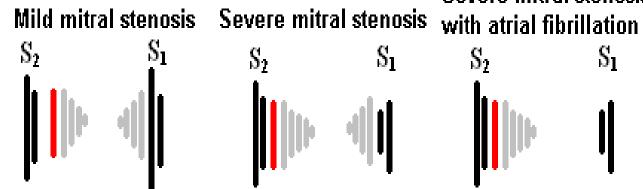


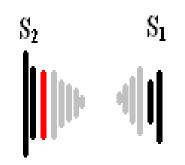
#### **Clinical Observation:**

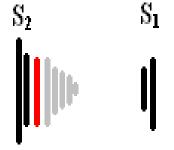
- -Murmur over apex  $\rightarrow$  could indicate mitral valve disease
- –Edema → possible right heart dysfunction

## The murmur of mitral stenosis

Severe mitral stenosis









**Opening Snap** 

## **Define (Identify the Core Problem)**

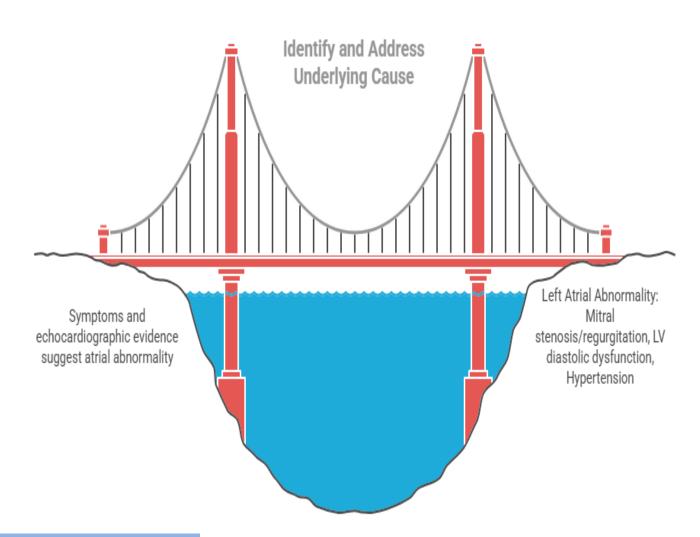


#### **Problem Statement:**

"The patient presents with symptoms and echocardiographic evidence suggesting abnormal atrial size and function due to underlying valvular or pressure overload pathology."

#### **Possible Causes:**

- -Left Atrial Abnormality:
  - Mitral stenosis or regurgitation
  - Left ventricular diastolic dysfunction
  - Hypertension

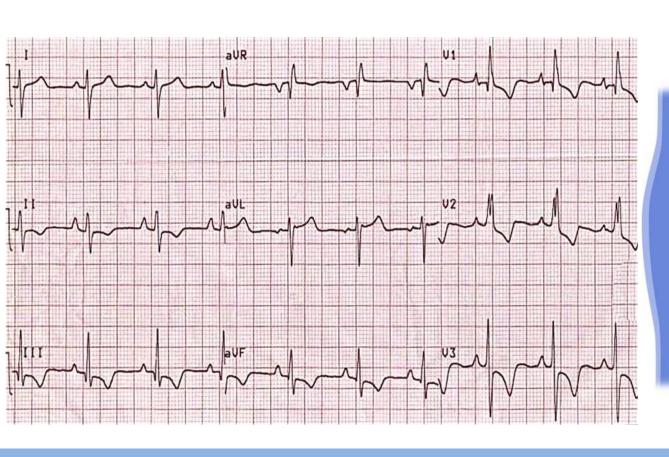


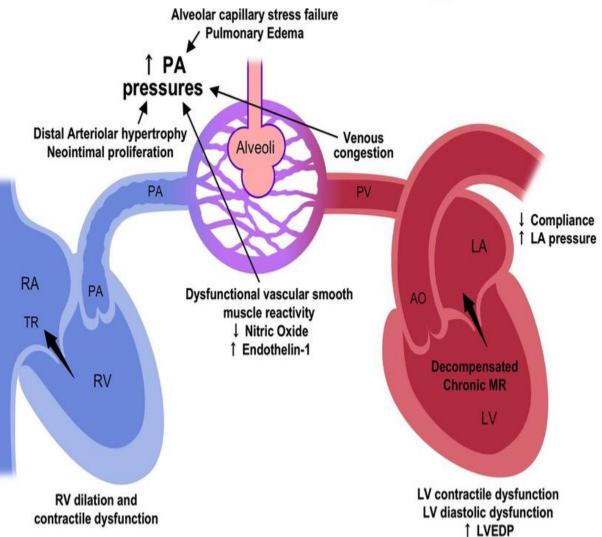
## **Define**

# STITUTIONS.

#### – Right Atrial Abnormality:

- Pulmonary hypertension
- Tricuspid regurgitation or stenosis
- Chronic lung disease





# Ideate (Generate Diagnostic and Assessment Approaches)



## **Investigations to Confirm Atrial Abnormalities:**

#### **– ECG Analysis:**

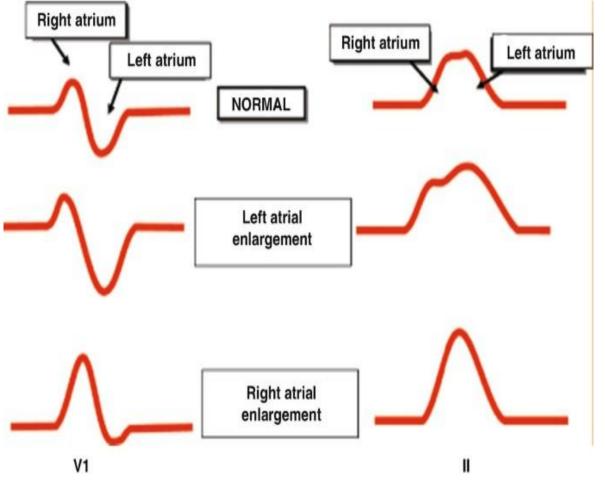
#### • Left Atrial Enlargement:

- −*P mitrale* − broad, notched P wave in lead II (>0.12 sec)
- -Biphasic P wave in V1 with wide negative terminal portion

#### • Right Atrial Enlargement:

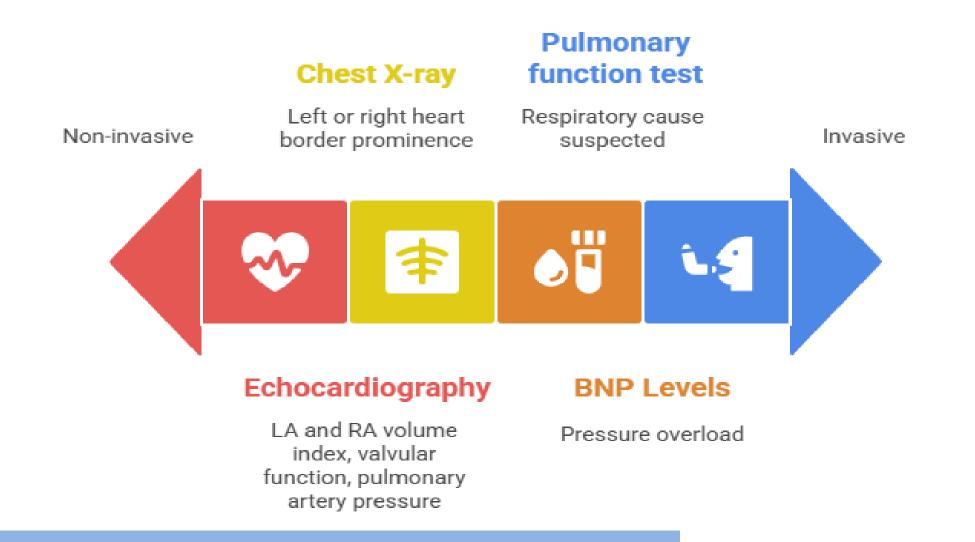
−*P pulmonale* − tall, peaked P wave in lead II (>2.5 mm)







## Diagnostic Modalities For Cardiac and Pulmonary Evaluation





# Prototype (Formulate Diagnostic Plan and Interpretation)

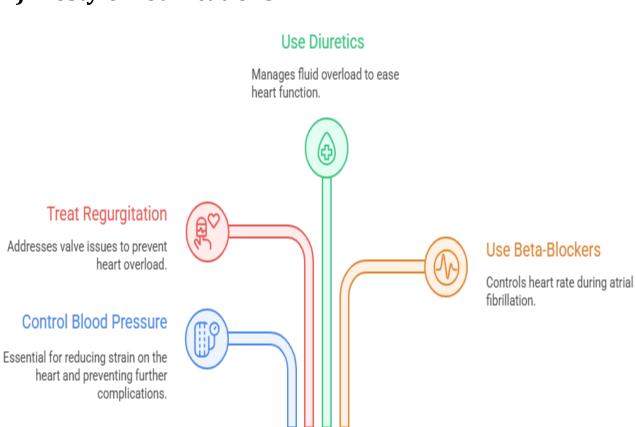
Parameter	Finding	Interpretation
LA Volume Index	48 mL/m <sup>2</sup>	Enlarged (Normal <34 mL/m²)
RA Area	24 cm <sup>2</sup>	Mildly Enlarged (Normal <18 cm <sup>2</sup> )
Mitral Valve	Thickened, mild regurgitation	Cause for LA overload
Tricuspid Valve	Mild regurgitation	Secondary RA enlargement
Pulmonary Pressure	45 mmHg	Mild pulmonary hypertension

## Test / Evaluate (Evolve the Understanding and Treatment Plan)



### A) Medical Management:

#### **B)**Lifestyle Modifications:





## **Summary**



**Test/Evaluate Define Empathize** Ideate **Prototype** Identify patient's Problem statement Treatment & Diagnostic work-up Diagnostic ideas & causes symptoms & needs reassessment





- Otto CM, *Textbook of Clinical Echocardiography*, 6th Edition, Elsevier.
- Feigenbaum H., Echocardiography, 8th Edition, Lippincott Williams & Wilkins.
- Goldberger AL, *Clinical Electrocardiography: A Simplified Approach*, 9th Edition.
- Journal of the American Society of Echocardiography (JASE) articles on atrial strain and remodeling.
- Braunwald's *Heart Disease: A Textbook of Cardiovascular Medicine*, 12th Edition.