

Electrocardiographic Diagnosis Clues in Cardiac Amyloidosis (CA)

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1. Low voltage on limb leads defined by the amplitude of the QRS complex in each limb leads ≤ 0.5 mV.(present in 77% of cases) (2)
2. Left axis deviation: QRS axis from -30° to -90°
3. Extreme right axis deviation: QRS axis between -90° to -180° "North West quadrant"
4. Pseudo-infarct pattern defined by the presence of pathologic Q waves on at least two contiguous leads on ECG without obstructive coronary artery disease. (present in $\approx 85\%$)(1)
5. First degree AV block
6. Sometimes loss of R waves in leads II, III and aVF
7. Prolonged QRS interval(104 ± 25)
8. Conduction defects. Nonspecific intraventricular conduction delay, LBBB, RBBB
9. Arrhythmias: Atrial fibrillation, ventricular premature contractions (3)
10. Others atrioventricular blocks ($\approx 20\%$)
11. Reduced R waves in V1-V4, and both.(2)(57% of cases)
12. **The combination of low voltage on limb leads and pseudo-infarct pattern had high specificity and positive predictive value for the diagnosis of CA. (4)**

References

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