

SINOATRIAL NODE DYSFUNCTION IN PERICARDITIS

To the Editor:

One interesting feature of the follow-up electrocardiogram that Dr. Nowakowski et al neglected to mention in their article entitled "Pericarditis Associated with *Campylobacter jejuni* Enterocolitis"¹ was the heart rate of 40 to 55 bpm in their 15-year-old patient. Although sinus arrhythmia is common in youth and during sleep, I also would suspect sinoatrial (SA) node dysfunction in this patient with pericarditis. The SA node is an epicardial structure and is situated at the junction of the superior vena cava and high right atrium at the pericardial reflection. The effect of the inflammatory process of pericarditis on SA node function is not unexpected, although it is frequently overlooked.

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In response:

Observation of bradycardia in a patient with pericarditis is certainly valid. Although sustained arrhythmias are uncommon in acute pericarditis,² it has been documented that epicardial and pericardial disease, such as tumors and pericarditis, may affect the SA nodal function by token of the proximity of the SA node to these structures.³

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References

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2. Spodick DH. Arrhythmias during acute pericarditis. A prospective study of 100 consecutive cases. *JAMA* 1976; 235:39-41.
3. James TN. Pericarditis and the sinus node. *Arch Intern Med* 1962;110:305-11.

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