

# Congenital $\uparrow$ QT<sub>c</sub> Syndrome (Channelopathy)

## How?

3 Major LQTS<sub>1,2,3</sub> Mutations

↓  
Impaired Ion<sub>K<sup>+</sup> >> Na<sup>+</sup></sub> Channels

↓  
 $\uparrow$  Action Potential ( $\uparrow$ QT<sub>c</sub>), Repol Abn

↓  
Early Afterdepolarizations

- $\downarrow$  K, Mg, Ca  $\downarrow$  •  $\uparrow$  Sympa
- Meds  $\downarrow$  - Exercise Stress
- Acute Arousal

(@jackpenner Acquired LQTS)

★ Polymorphic VT (TdP) ★

## Who?

- >1 in 2000
- Penetrance Variable, Low As 10%
- Dx by 30 yo
- Family History

## What?

- Majority Without Sx @ Dx And Life
- Triggered Syncope +/- Seizure
- Incidental  $\uparrow$ QT<sub>c</sub>
- Sudden Cardiac Arrest
- Rarely 1<sup>st</sup> Event SCD
- $\uparrow$  Postpartum  $\heartsuit$  Events

## Arrhythmia?

- PVT/TdP (Most Common)
  - Typically Short Lived
  - Progress Syncope +/- V. Fib
- AV Block (~5%)

## Associations?

- SN Deafness (JLN Syndrome)
- Hypokalemic Periodic Paralysis

## Dx:

- $\uparrow$ QT<sub>c</sub>  $\rightarrow$  Genetics
- Ekg in Family

## Rx:

- Avoid QT<sub>c</sub> Meds
- Asymptomatic vs Symptomatic (Type)

## Menu

- Avoid  $\uparrow$  Sympa
- B-blocker
- ICD

## Edu:

- Many w/ Wrong Dx of Seizure
- Ekg After 1<sup>st</sup> Seizure
- AEDs w/ Na Channel Blocking  $\uparrow$  SCD
- ICD NOT Needed in Most