INTRODUCTION

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Knowledge and understanding of cardiac arrhythmias is particularly important in the pediatric age group where rapid and energetic treatment can be life saving. Disturbances of heart rhythm can produce a wide range of haemodynamic effects: They may be completely asymptomatic or at the other end of the spectrum produce gross heart failure syncope or death. In the first few months of life the sudden onset of a tachycardia can cause rapid change in the infant's condition. In association with a congenital heart defect may prove life threatening.

Cardiac arrhythmias of any form may occur as an isolated phenomenon or secondary to some other cause, particularly structural defects of the heart. Certain forms of congenital heart disease are commonly associated with rhythm disorders. Both Ebstein's anomaly and corrected transposition are commonly complicated by frequent and prolonged episodes of supraventricular tachycardia and in the latter condition it is the presence of complicating tachycardia that is the major determinant of morbidity and mortality. Frequently after open heart surgery both bradycardia and tachycardia are seen. (Kim M.F. 1980)

This essay provides the types of arrhythmia in the neonates and the etiology, clinical pictures and hemodynamics of each of these types. It also provides all the tools necessary for the diagnosis and managments of an infant with an arrhythmia.

The subject of neonatal arrhythmia is preceeded by the anatomy, embryology, physiology of the conduction system and also by the pathophysiology of the conduction mechanism which help the study of the subject of arrhythmias.