SUMMARY & CONCLUSIONS

The present study aims at comparing the safety and effectiveness of intravenous magnesium sulfate versus Verapamil in acute conversion of supraventricular tachycadia. The dose used was 0.075 mg / kg for verapamil and 2 gm for magnesium sulfate(over 5 second) then a next dose of either drugs is used if the first dose is ineffective. Direct current shock was used if the drug failed or complications developed.

Every patient was subjected to, medical history, physical examination, ECG to document the arrhythmia, ECG after termination & echocardiography to study left ventricular function was done.

Statistical analysis of the results was performed using student "t" test & paired "t" test, correlation test & chi square test.

The primary comparison was done between verapamil group and Mgso4 group as regards conversion rate, conversion time and the effect of both drugs on blood pressure and heart rate.

- conersion rate: Conversion rate for verapamil was 88.88% and for magnesium sulfate 94.44 % which is statistically insignificant.
- Conversion time: there was highly significant difference in conversion time between verapamil & magnesium(106,66±21,14seconds) & (29,33+6 seconds) respectively.
- Heart rate (H.R) and blood pressure (BP): Both drugs caused significant drop of heart rate Mgso4 causes significant drop on blood pressure but verapamil causes highly significant drop in blood pressure.
- -Side effects: hypotension in three patients with verapamil, with no recorded side effects with magnesium sulfate.