

中文題目：利用 CHA2DS2-VASc 計分及 14 天連續心電圖居家監測偵測心律不整

英文題目：Arrhythmia Detection by CHA2DS2-VASc Score Through 14-Day Continuous Electrocardiography Patch Monitoring

作者：鄭郁雯¹，巫龍昇^{1,2}，吳家棟^{1,2}，林佳濱^{1,2}，褚柏顯^{1,2}

服務單位：¹林口長庚紀念醫院內科部心臟內科系，²長庚大學醫學院

Objective

Arrhythmias are not always easy to capture because they are often paroxysmal or even asymptomatic. The 14-day ECG patch was well tolerated and allowed for longer continuous monitoring than the 24-hour Holter monitor.

Methods

By using CHA2DS2-VASc score for arrhythmia risk assessment, we used the 14-day electrocardiography monitor patch to evaluate the patients without documented arrhythmia history. The patients' medical history and current medications, ECG monitor tracings and monitoring periods were collected for further analysis.

Results

We enrolled 93 patients (age 59.8 ± 12.0 years, 46.2% female) received 14-day ECG telemonitoring and 14 patients (15%) were diagnosed with arrhythmia. The patients who were detected arrhythmia were more likely to have older age ($p=0.036$), heart failure ($p=0.024$) or chronic kidney disease ($p=0.002$) compared to their counterparts. GEE analysis disclosed that 14-day CHA2DS2-VASc score above four indicates arrhythmias risk ($p<0.001$). For AV block detection, using the score above three, a 7-day monitoring periods is sufficient ($p=0.013$).

Conclusion

Patients with arrhythmias are more likely to be those of older age, have heart failure or chronic kidney disease. When evaluating arrhythmia risks in 14-day monitor periods, patients with CHA2DS2-VASc score higher than four are in greater risk of arrhythmias.