

وَبَيْنَ الْيَدَيْنِ

حَالِي

السَّلَامُ عَلَيْكُمْ وَرَحْمَةُ اللَّهِ وَبَرَكَاتُهُ



Cardiovascular System Block

The Electrocardiogram

(ECG)

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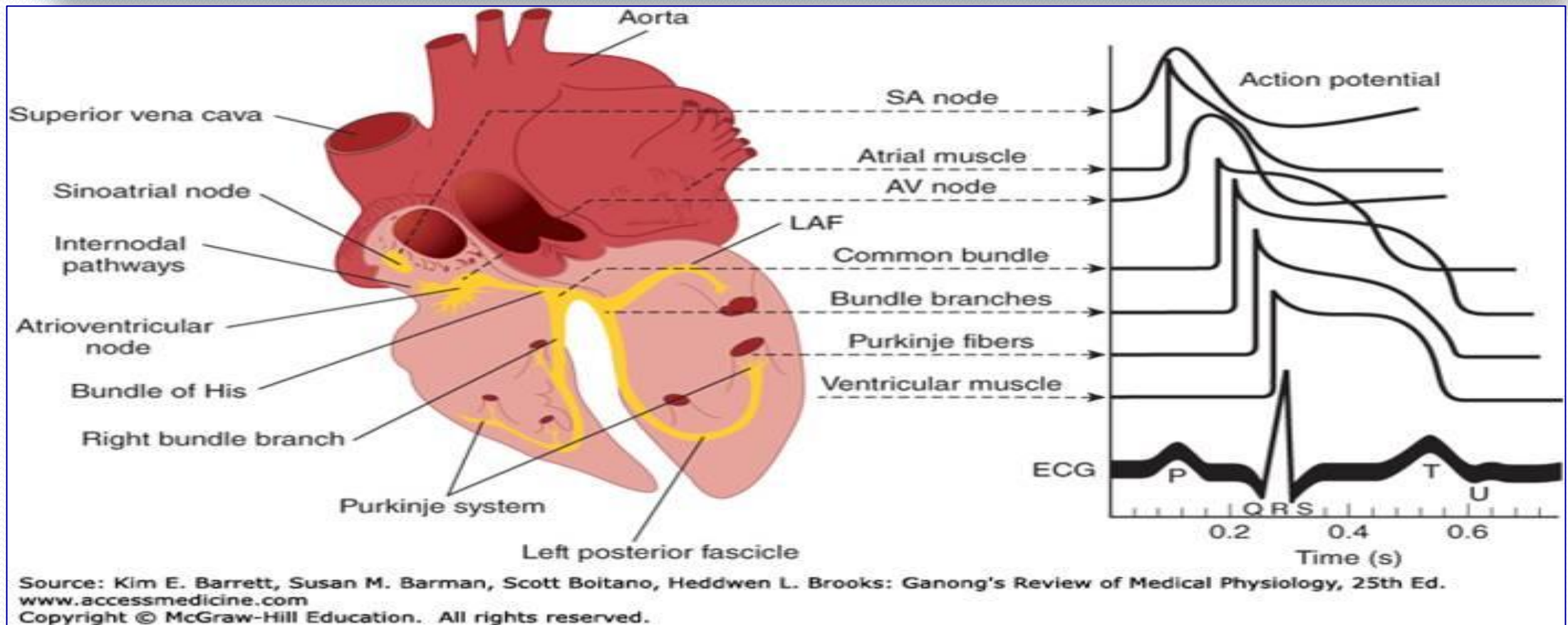


Lecture Objectives

1. Identify waves of the normal ECG and the physiological cause of each one
2. Define the normal intervals in the ECG trace.
3. Determine the bipolar, unipolar and chest leads.
4. Know what is Einthoven's triangle and Einthoven's law.
5. Practical use of the ECG .

The Electrocardiogram (ECG)

It is the record of the electrical activity i.e. action potentials generated by the heart during cardiac cycle

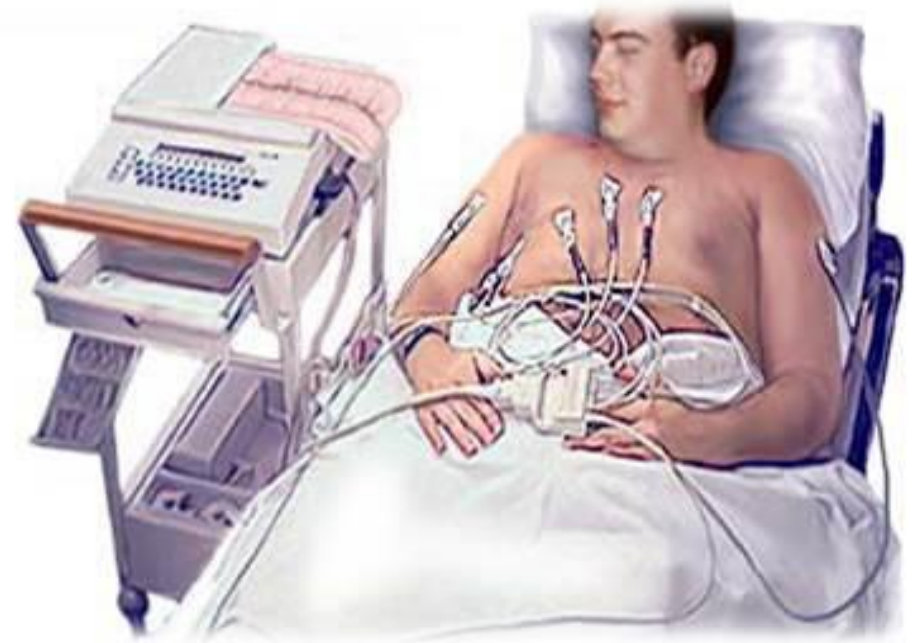


How ECG can be recorded?

- ECG can be recorded by placing electrodes on body surface on opposite sides of the heart.

The Principle of ECG

- When the depolarization wave spread through heart, electrical currents pass into the surrounding tissue.
- Part of the current reaches the surface of the body (body fluids are good conductors).
- The electrical potentials generated by these currents can be recorded from electrodes placed on the skin opposite the heart.
- The record is the ECG.



Methods for Recording ECG

Computer-based and electronic display

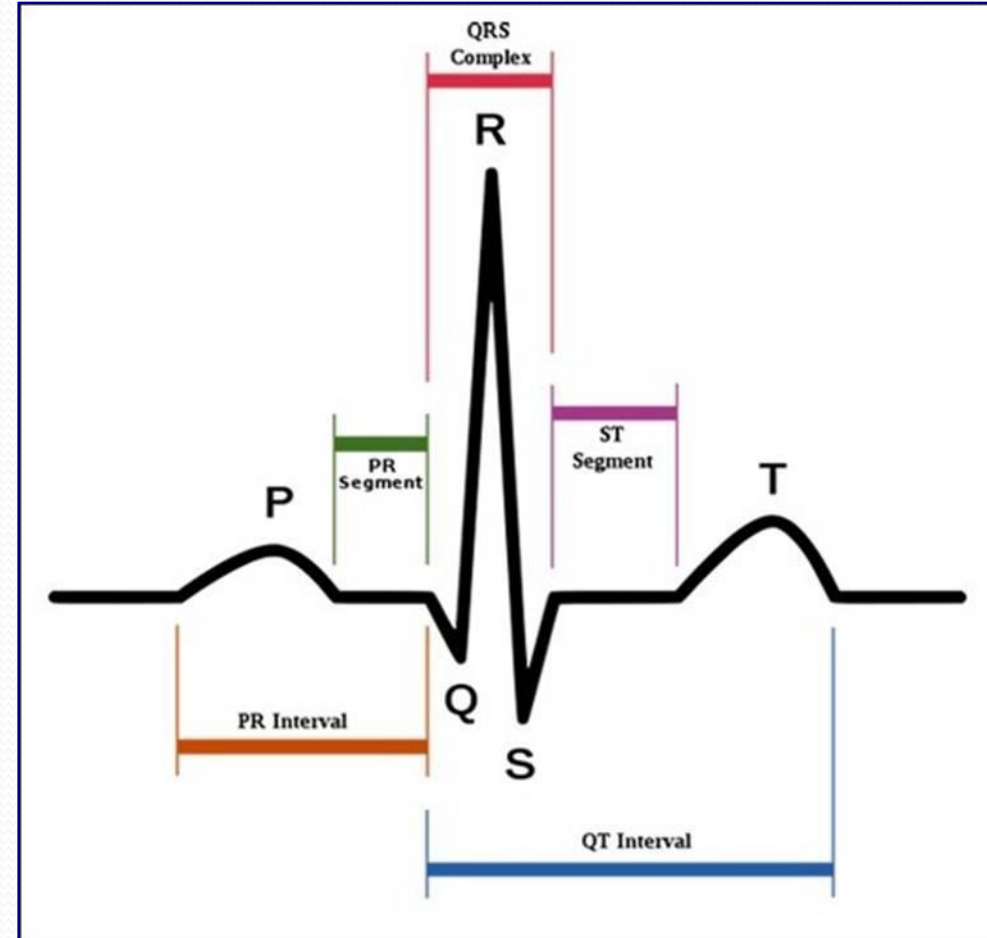


Pen recorder and a moving sheet

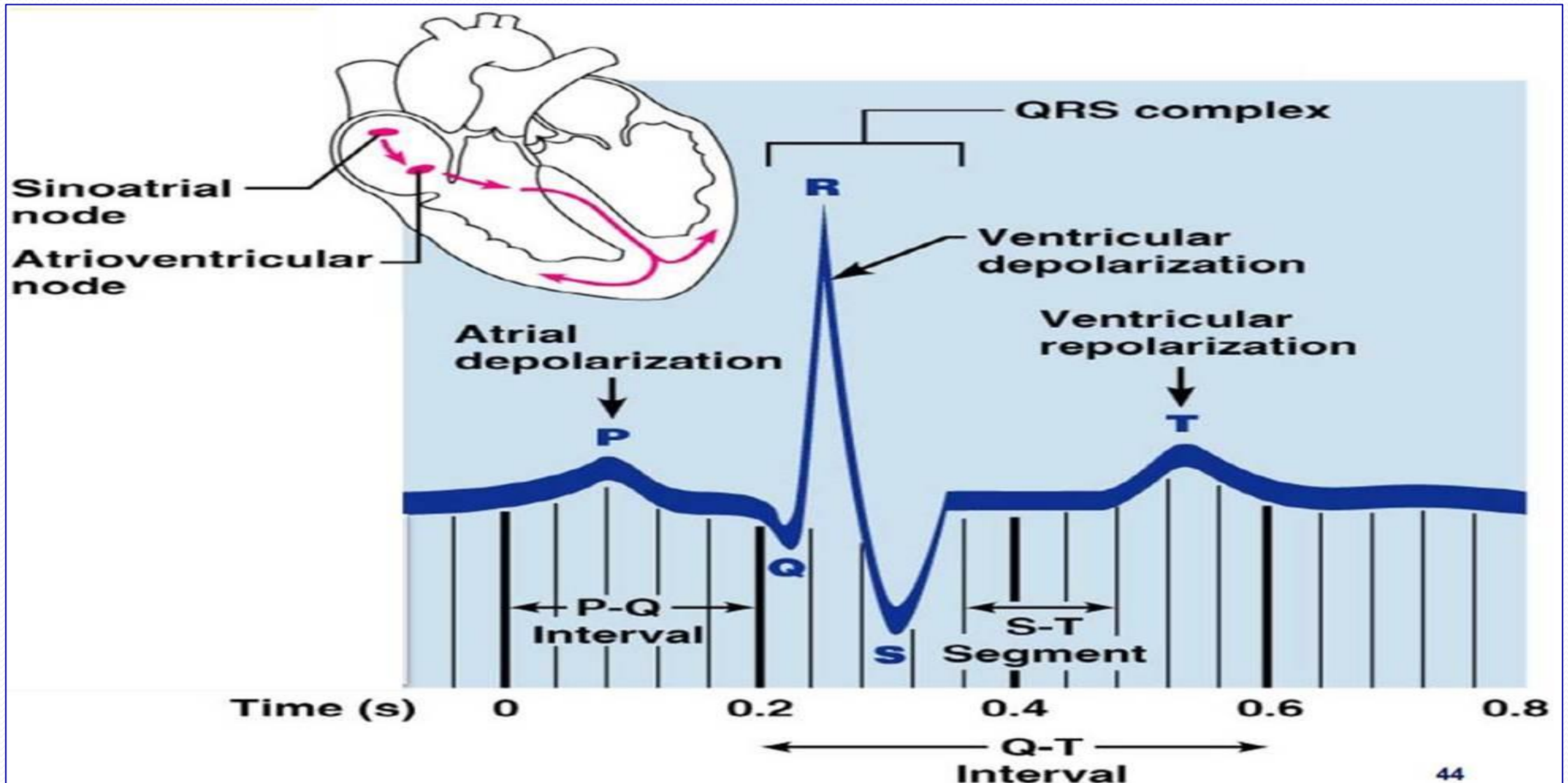


ECG Waveforms, Intervals & Segments

- 3 waves: (depolarize & repolarize)
 - P- wave
 - QRS complex
 - T- wave
 - P, R & T- waves are positive
 - Q & S- waves are negative
- 3 time intervals: (include waves)
 - P-R interval
 - Q-T interval
 - R-R interval
- 3 segments: (isoelectric, & doesn't include waves)
 - ST segment
 - TP segment
 - PR segment

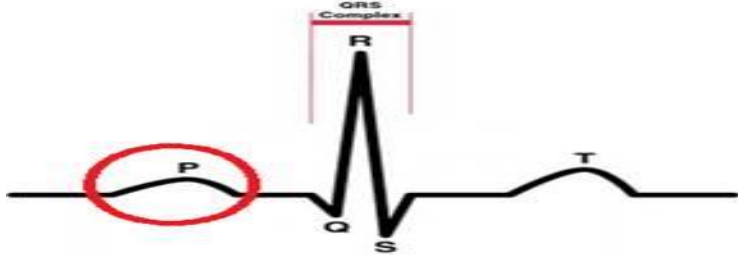


Record of the Electrical activity of the heart by ECG



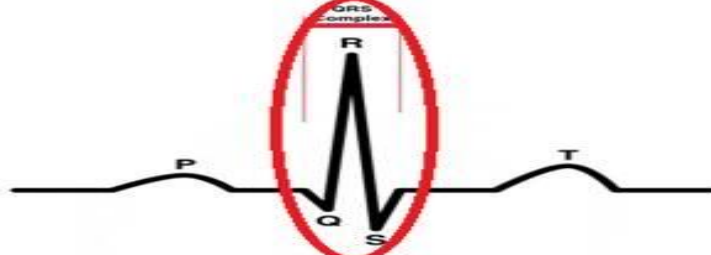
Analysis of Normal ECG

P-wave



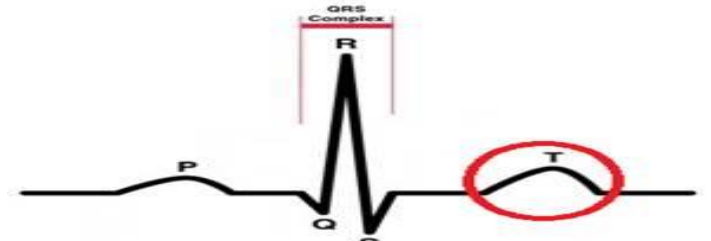
- Due to atrial depolarization
- P-wave is recorded before the onset of atrial systole
- Atrial repolarization occurs at the same time with ventricular depolarization. But, since ventricular depolarization wave is giant, it masks the atrial repolarization wave

QRS complex



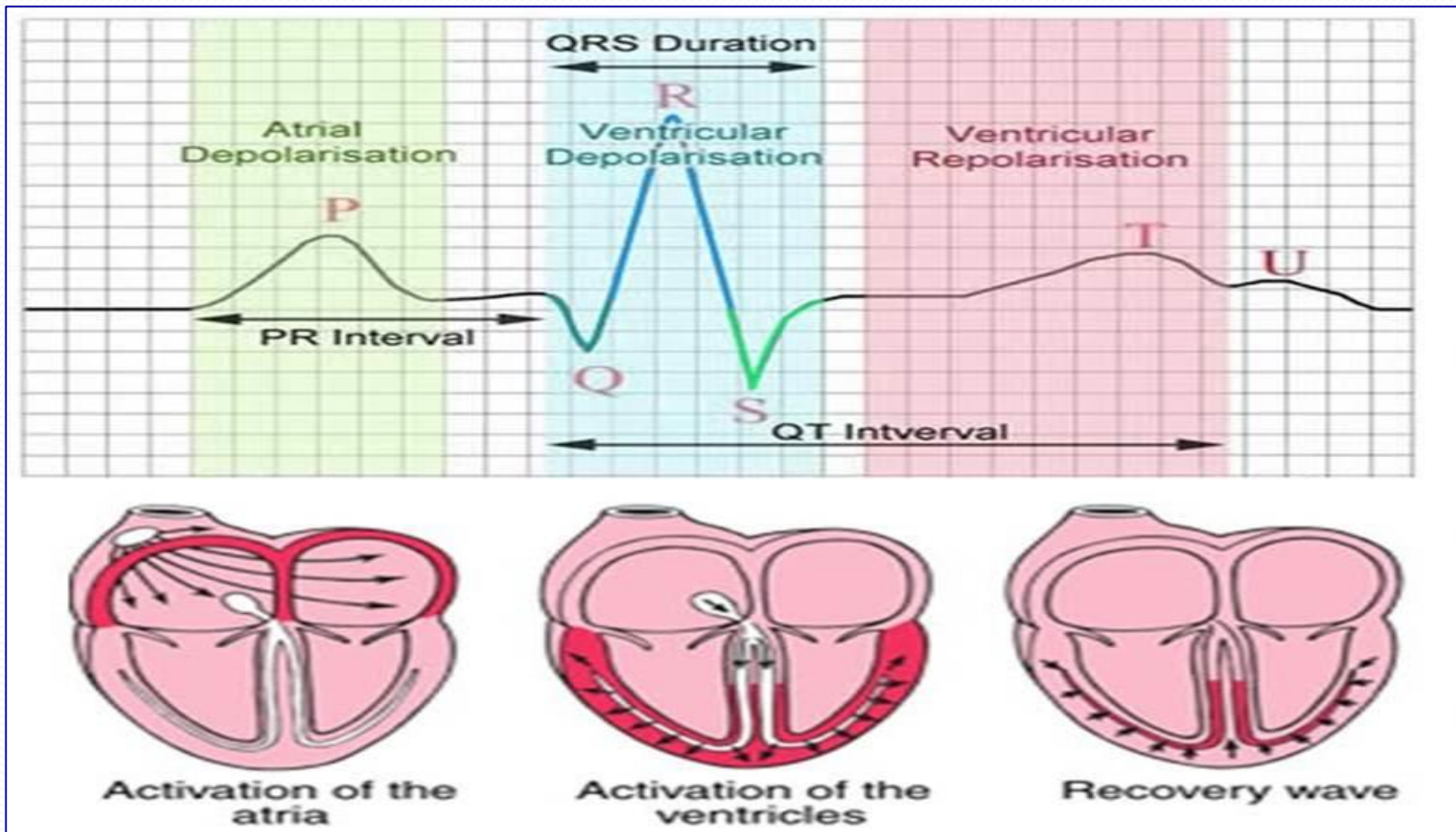
- Due to ventricular depolarization
- Q-wave due to depolarization of interventricular septum
- R-wave due to depolarization of most ventricular wall
- S-wave due to depolarization of base of the heart
- QRS complex is recorded before the onset of ventricular systole

T-wave



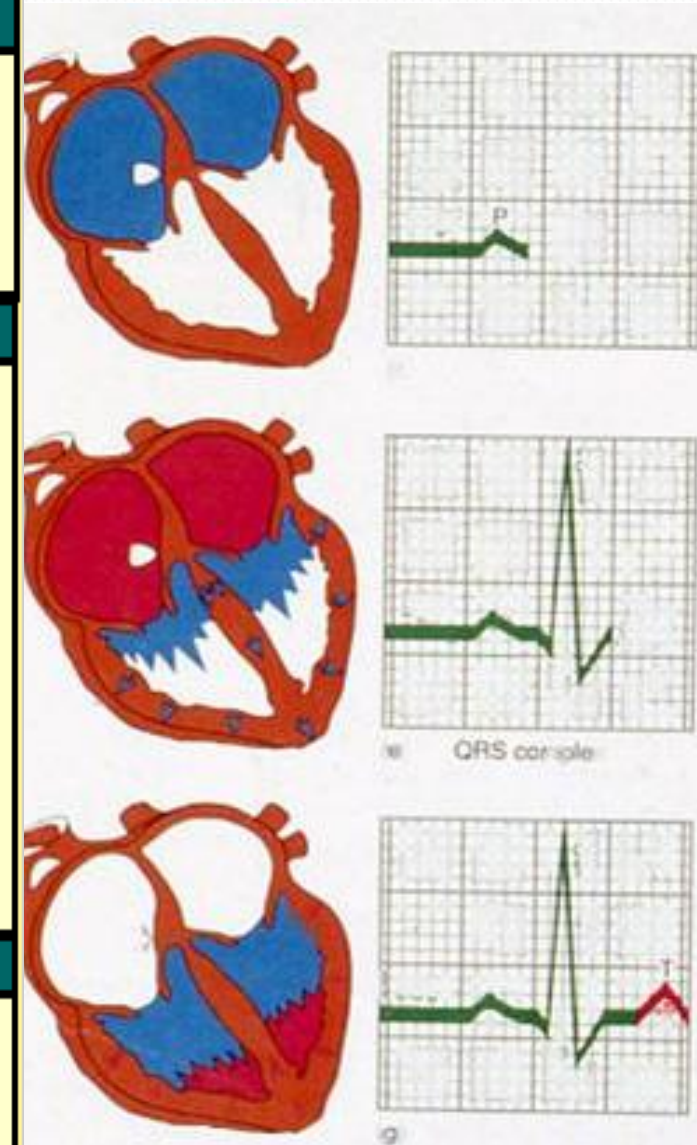
- Due to ventricular repolarization
- T-wave is recorded before the onset of ventricular diastole

Normal ECG



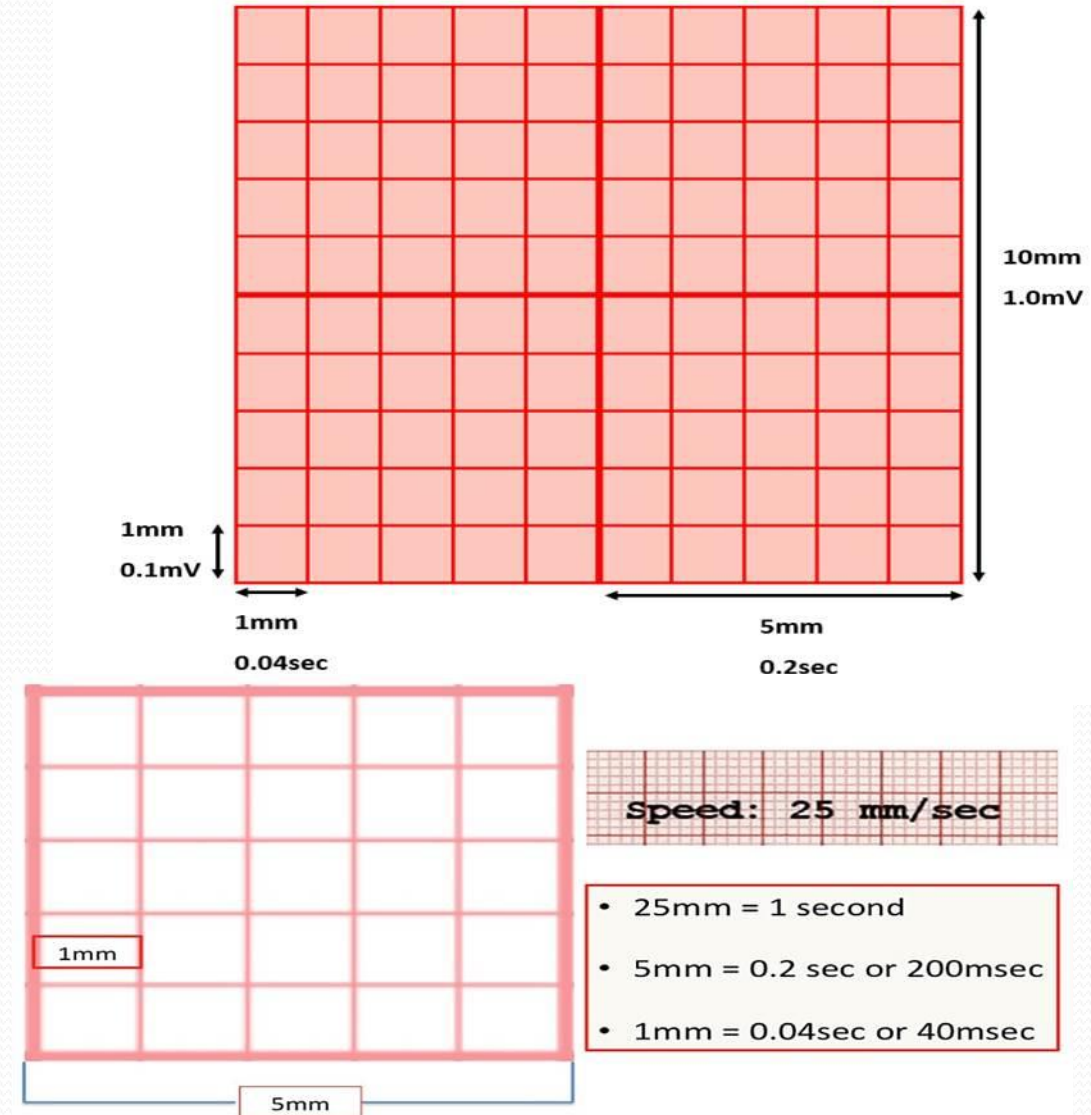
Causes of ECG Waves

ECG Wave	Cause	Represent
P- wave	Atrial depolarization	<ul style="list-style-type: none"> ⌘ Time of electrical impulse from SA node to spread through atrial muscle ⌘ Precedes atrial contraction by ≈ 0.02 sec
QRS- complex	Ventricular depolarization	<ul style="list-style-type: none"> ⌘ Measured from beginning of Q wave till end of S wave ⌘ Consists of 3 waves: <ul style="list-style-type: none"> Q wave: (-ve): Produced by depolarization of interventricular septum R wave: (+ve): Produced by depolarization of ventricular wall S wave: (-ve): Produced by depolarization of the base of the heart ⌘ Precedes ventricular contraction by ≈ 0.02 sec. ⌘ Occurs after P-wave by $\approx 0.12-0.2$ sec = PR interval
T- wave	Ventricular repolarization	<ul style="list-style-type: none"> ⌘ Occurs during latter part of systole, before the onset of diastole

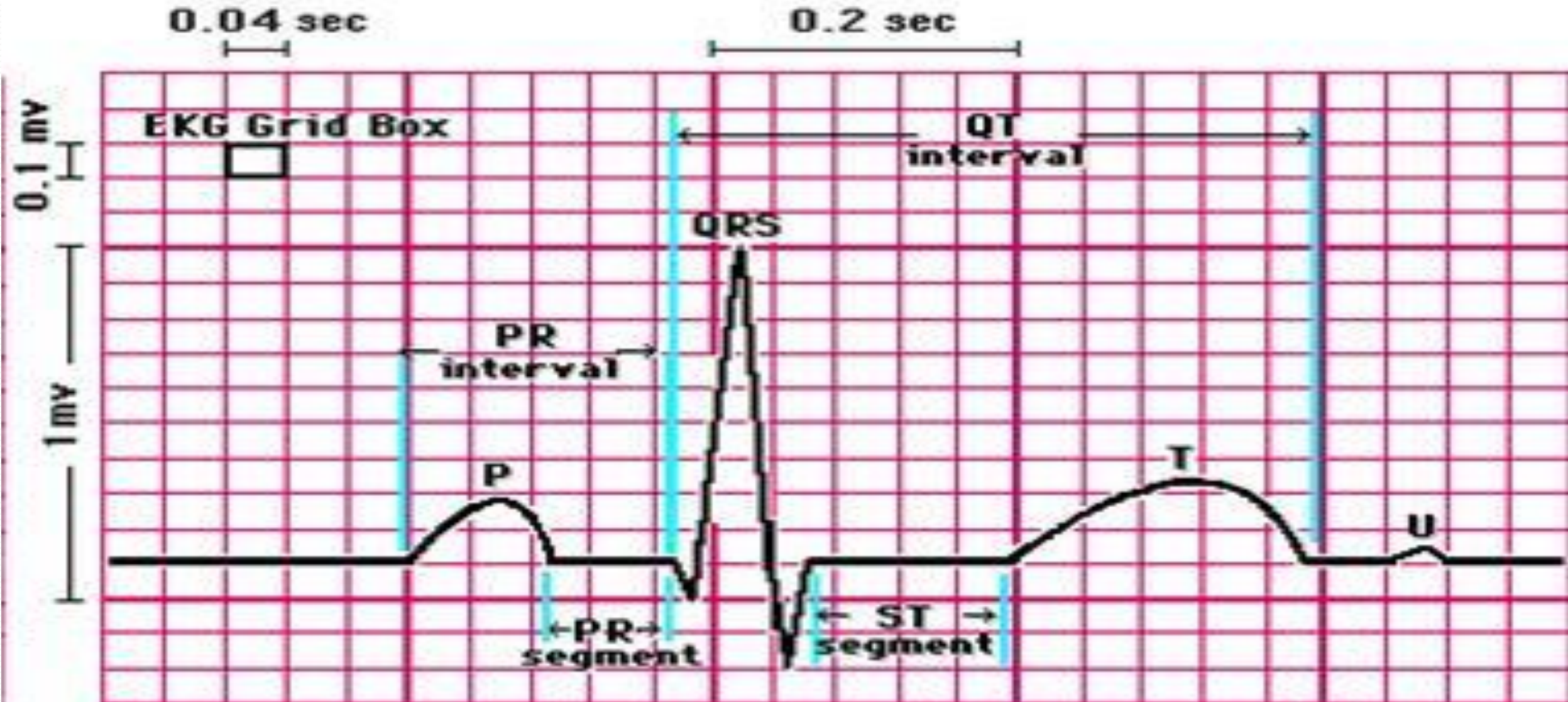


ECG Paper Calibration: Voltage and Time

- ECG is displayed on a graph paper as waves
- Speed: ECG machine runs at 25mm/sec.
- **Voltage(millivolt) is calibrated on the vertical lines (Y-axis):**
 - 1mm square= 0.1 mV
 - 10 small squares = 1 mV
- **Time (seconds) is calibrated on the horizontal lines (X-axis):**
 - 1mm square = 1mm= 0.04 second
 - 5 small lines = 0.2 second
 - 25 small lines = 1 second

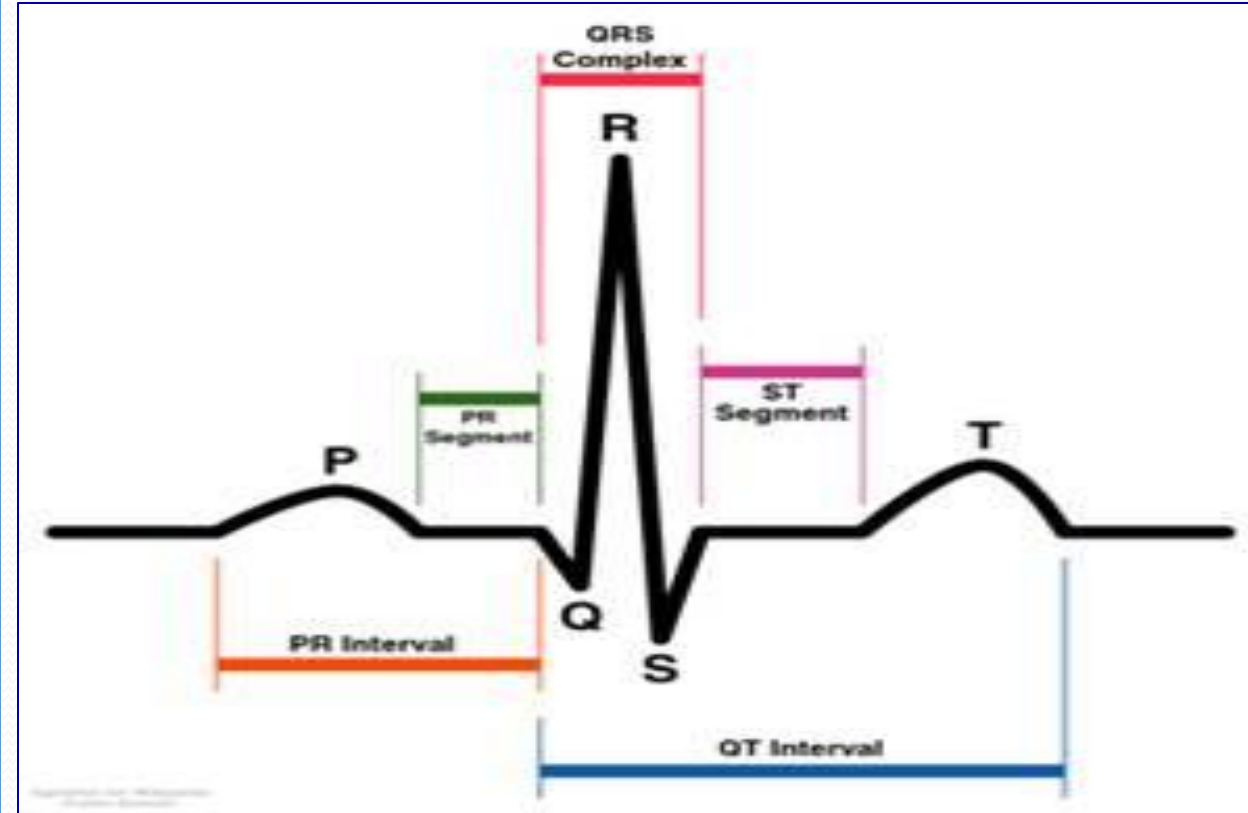


ECG Paper Calibration: Voltage and Time



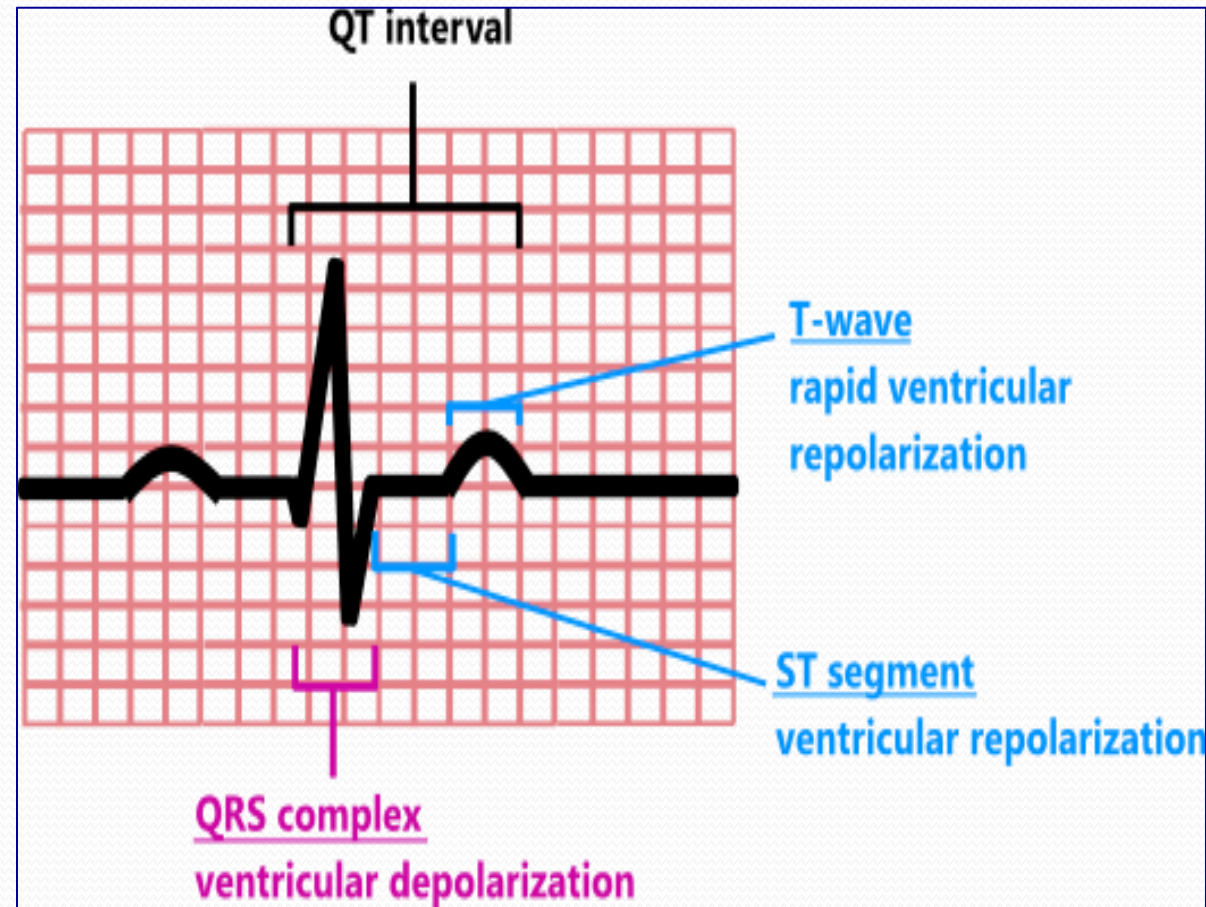
P-R interval

- Time period measured from start of P- wave to start of QRS complex; thus P-R interval includes P- wave & PR segment
- P-R interval is the time from the initial depolarization of atria to the initial depolarization of ventricles.
- P-R interval range = 0.12-0.2 sec.
- An increase in conduction velocity through AV node will decrease P-R interval (sympathetic stimulation) & vice versa.



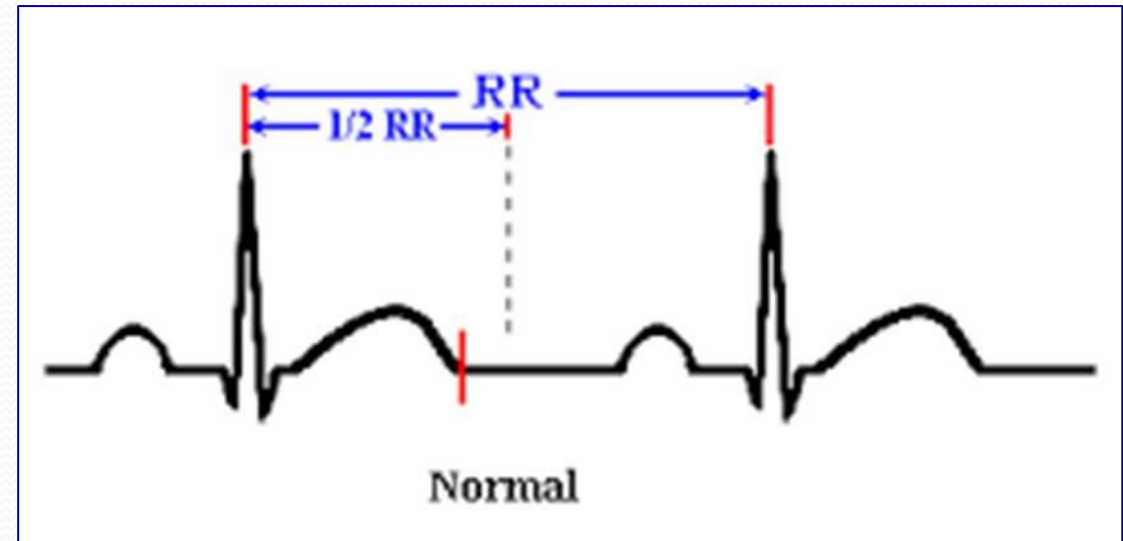
Q-T interval

- Q-T interval is the time from the beginning of the *Q wave* to the end of the *T wave*
- The QT interval represents total time taken by ventricle to depolarize & repolarize [contraction of ventricles]
- The Q-T interval includes the QRS complex, ST segment & T- wave.
- Q-T interval range = 0.35 – 0.45 sec.
- Approximate refractory period of ventricle.



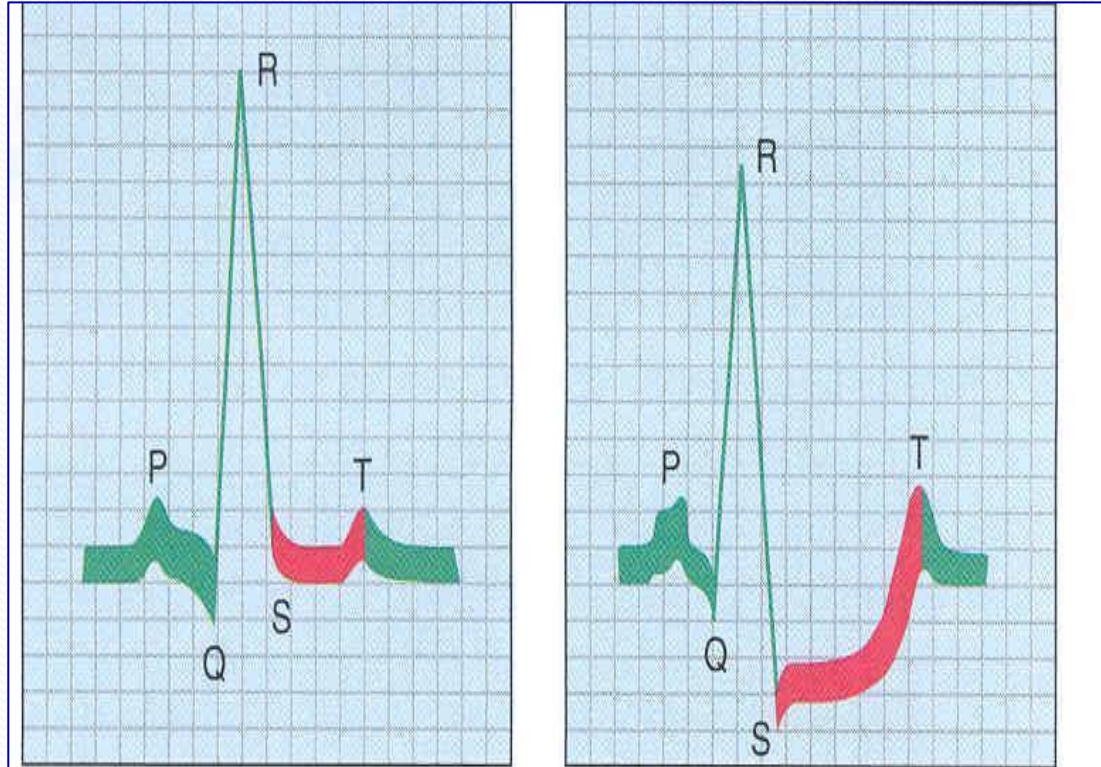
R-R interval

- The interval between two successive R- waves.
- It determines the heart rate & cardiac cycle length.
- Heart rate can be measured by counting the number of R-waves per minute.



S-T segment

- It is segment of ECG from end of S wave to beginning of T wave.
- During this segment all ventricular muscles are completely depolarized, showing that there is no potential difference between areas of myocardium at this stage.
- It roughly corresponds to the plateau phase of the ventricular action potential
- A normal S-T segment is on isoelectric line.
- If it is deviated up or down, it indicates diseased fibers.
- e.g. myocardial infarction.



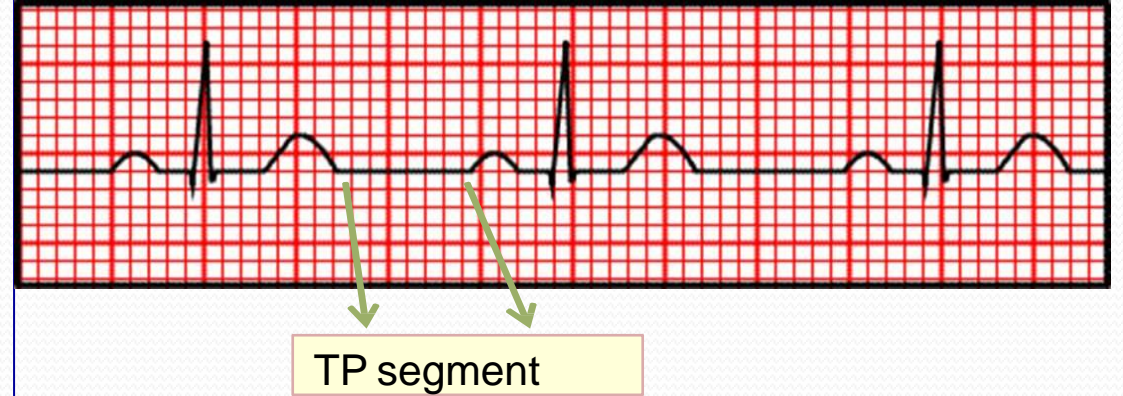
Normal

Ischemia

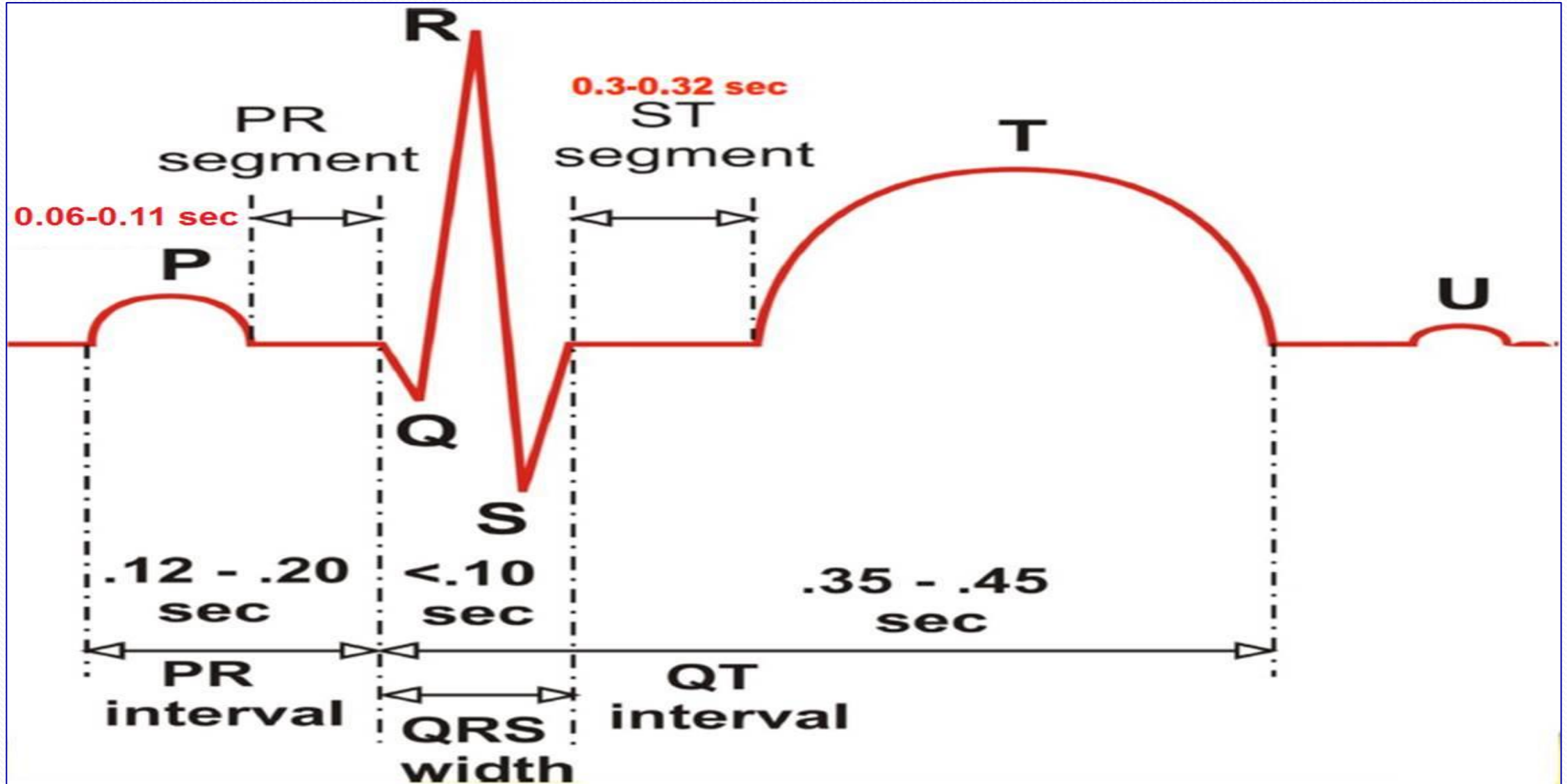
Depression of the S-T segment as a result of myocardial ischemia

T-P segment

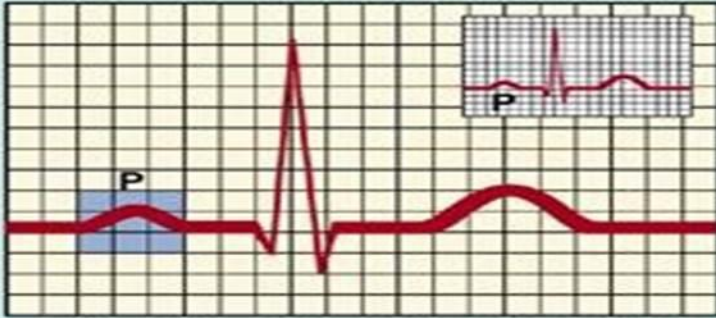
- Calculated from end of T- wave to beginning of P- wave.
- Time interval from ventricular repolarization till next atrial depolarization.
- It represents ventricular filling



Duration of ECG Waves & Intervals

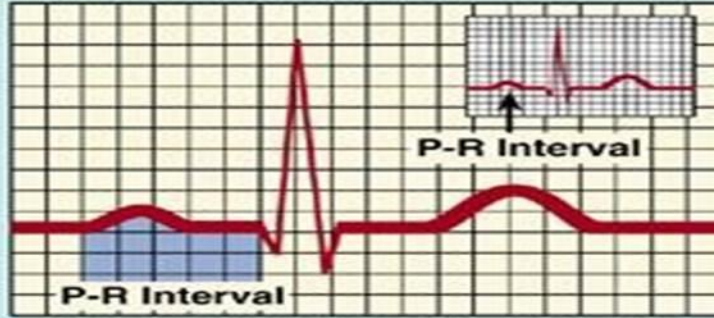


Atrial Depolarization (P-wave)



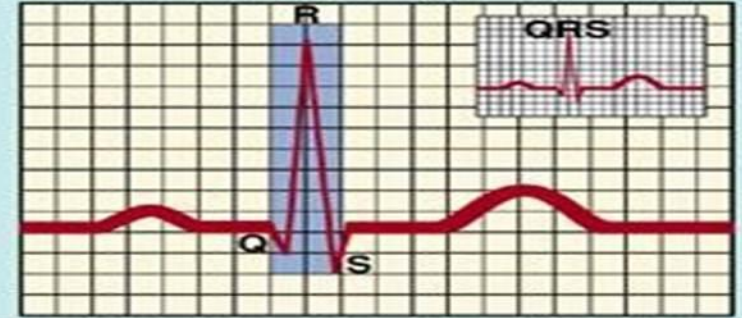
The depolarization of both atria is represented by the P-wave. The P-wave is the first ECG deflection.

P-R Interval



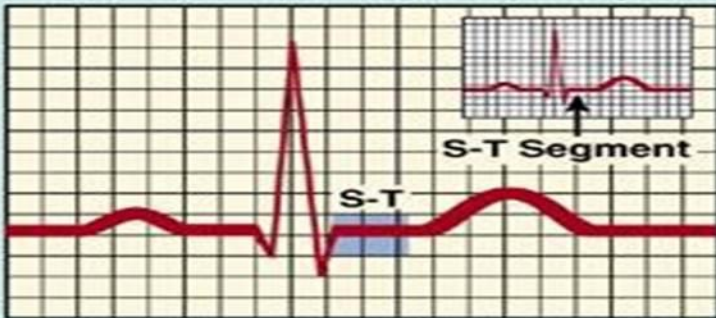
Electrical transmission from the atria to the ventricles. Includes the P-wave and P-R Segment.

Ventricular Depolarization (QRS)



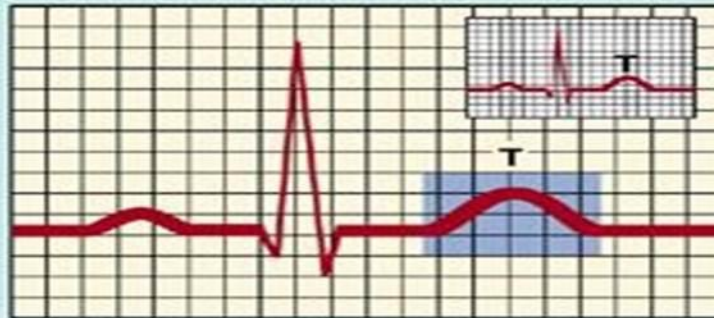
Ventricular depolarization is indicated by the QRS complex. The R-wave is the initial positive deflection; the negative deflection before the R-wave is the Q; the negative deflection after the R-wave is the S-wave.

Ventricular Repolarization (S-T Segment)



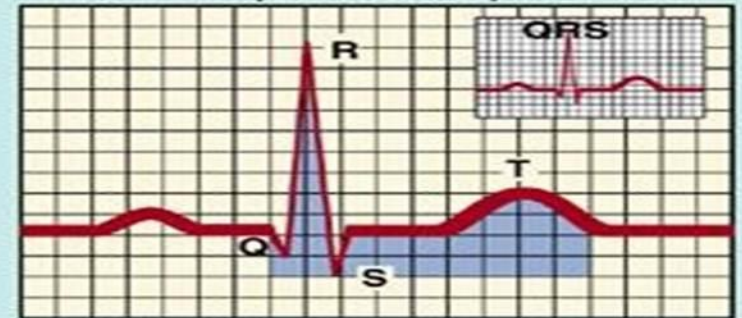
Earlier phase repolarization of both ventricles extends from the end of the QRS to the beginning of the T-wave. The point at which the S-T segment joins the QRS is known as the J (junction)-point.

Ventricular Repolarization (T-wave)



The repolarization of both ventricles is represented by the T-wave. The S-T segment and the T-wave are sensitive indicators of the oxygen demand-oxygen supply status of the ventricular myocardium.

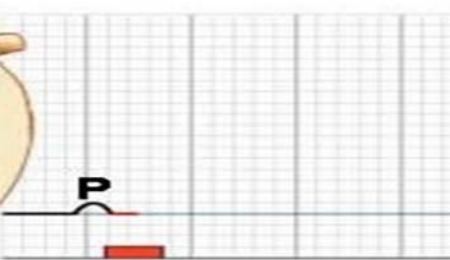
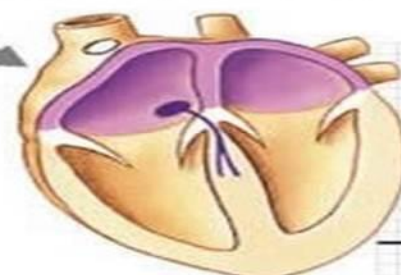
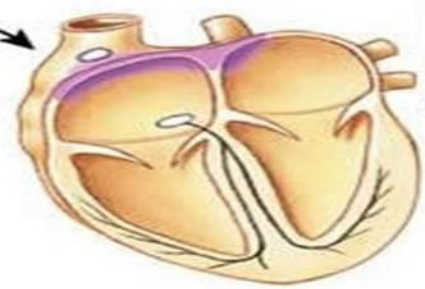
Ventricular Depolarization and Repolarization (Q-T Interval)



Includes the QRS complex, S-T segment, and T-wave.

START

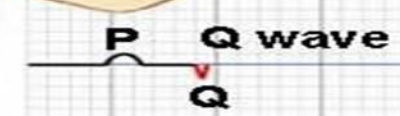
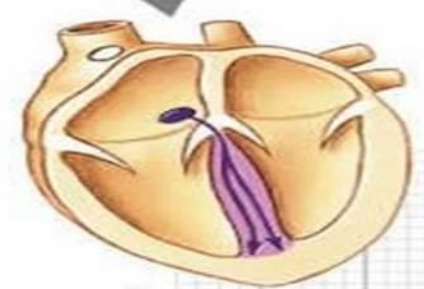
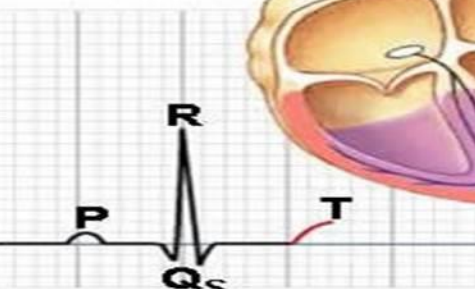
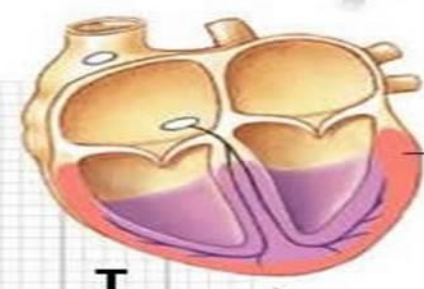
P wave: atrial depolarization



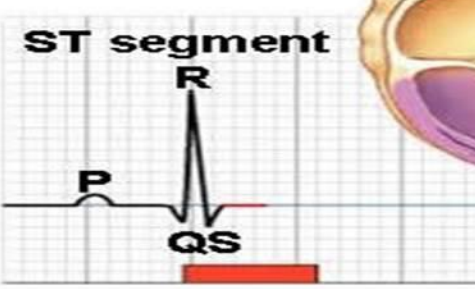
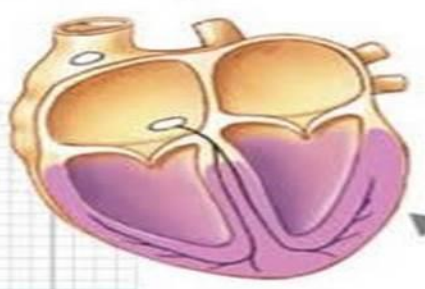
Atria contract.

**ELECTRICAL
EVENTS
OF THE
CARDIAC CYCLE**

Repolarization

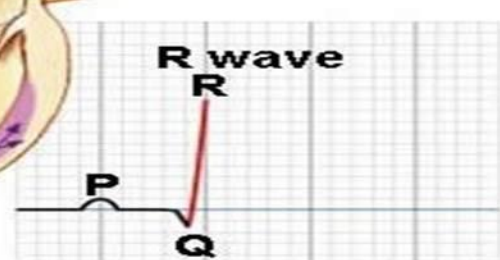
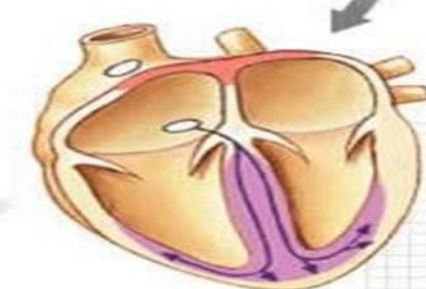


Q wave

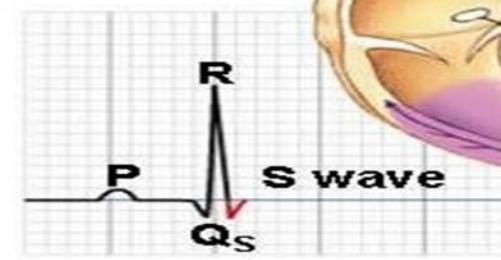


ST segment

Ventricles contract.

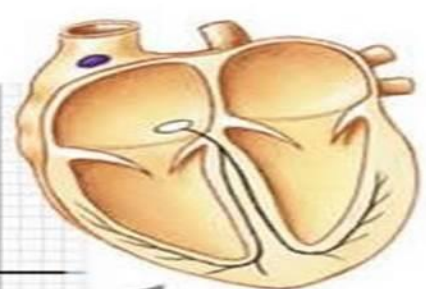


R wave



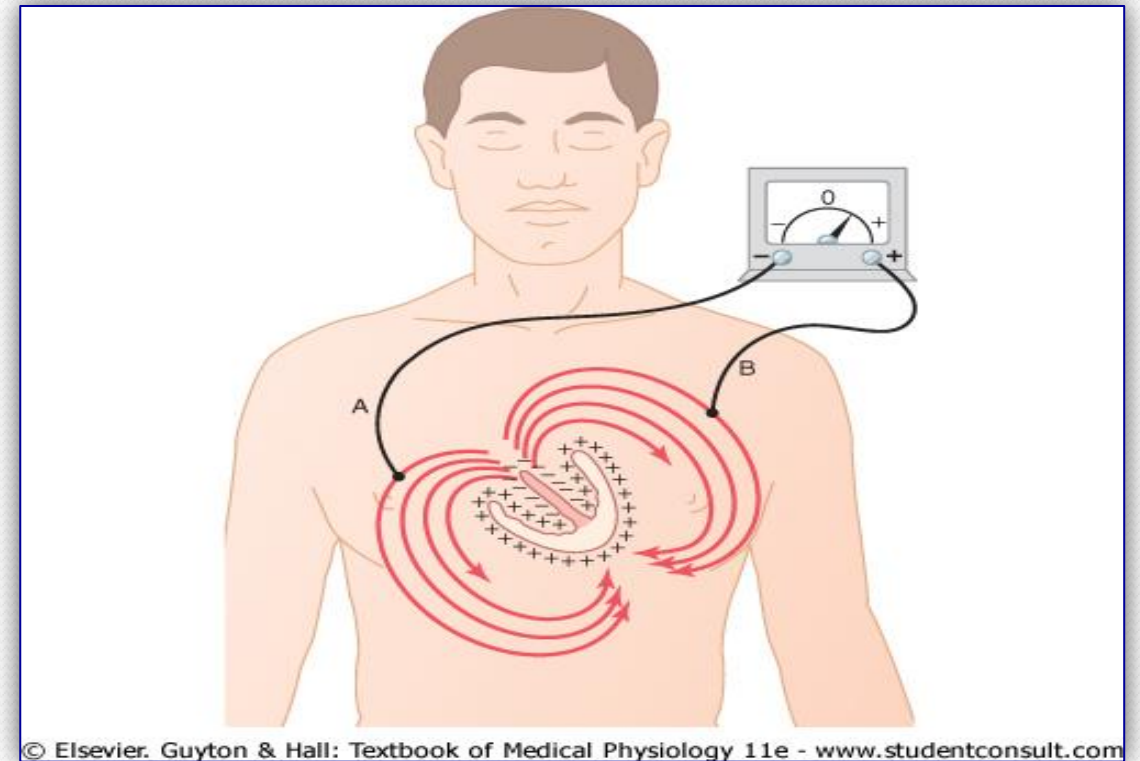
S wave

The end



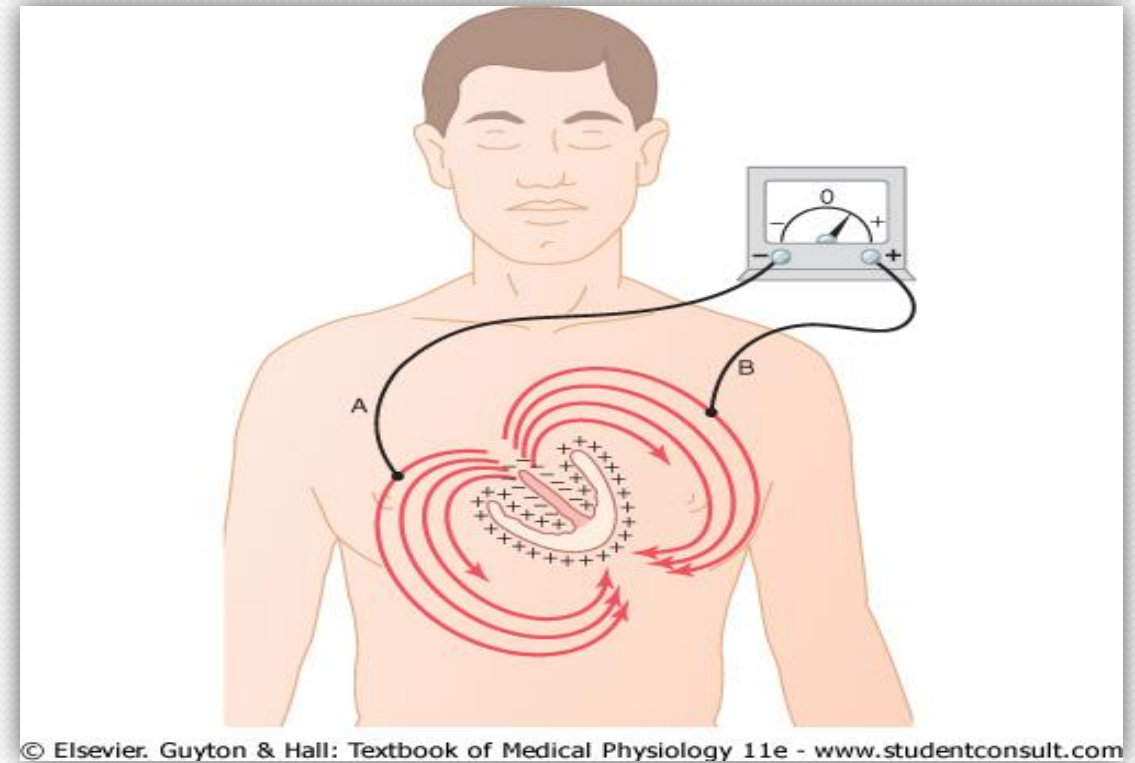
Flow of Electrical current in the Heart

- In normal ventricles, current flows from negative to positive, from the base of the heart toward the apex
- The first area that depolarizes is the ventricular septum



Flow of Electrical current in the Heart.....Cont.

- Current flows from the electronegative inner surface of the heart to the electropositive outer surface (from the base of the heart to the apex)
- An electrode placed near the base of the heart is electronegative, and near the apex is electropositive

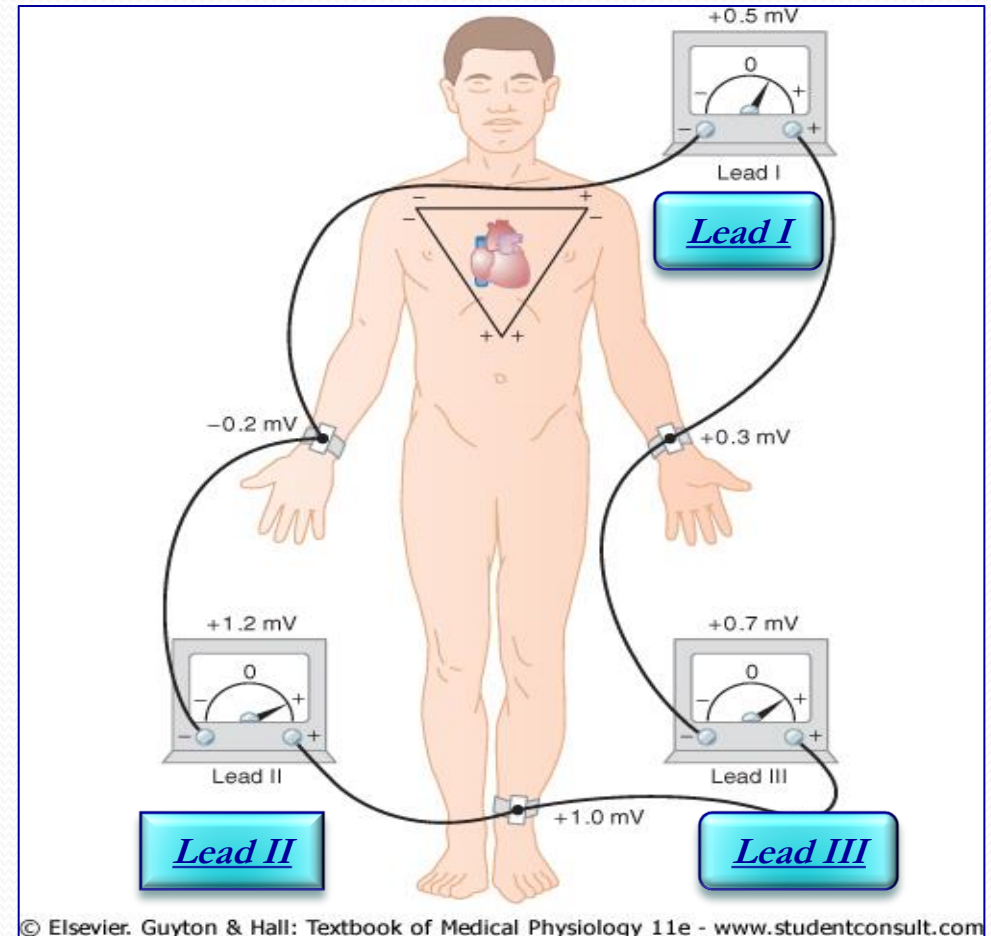


The ECG Leads

- An ECG lead is a pair of electrodes and their wires to make a complete circuit. They are applied to particular parts of the body.
- ECG leads are:-
 - The Bipolar Limb Leads: (I, II, III)
 - Augmented Unipolar Limb Leads (aVR, aVL, aVF)
 - Chest Leads: (V1, V2, V3, V4, V5, V6)

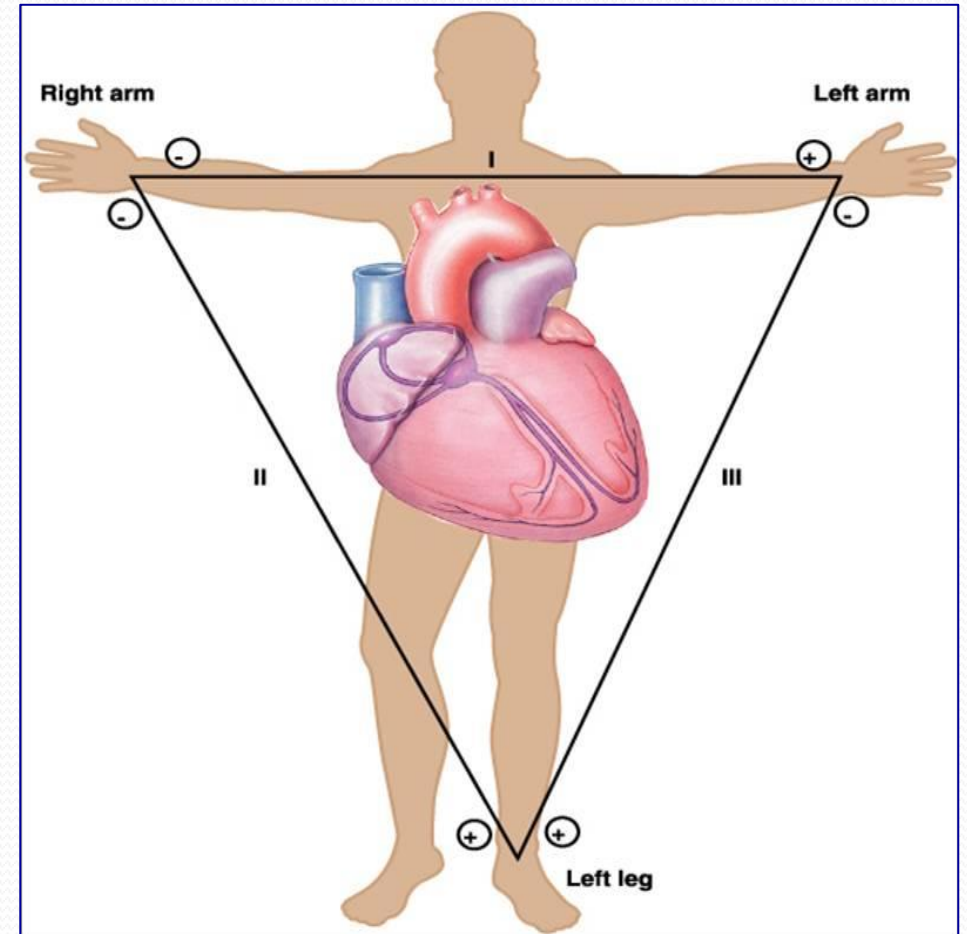
The Bipolar (Standard) Limb Leads

- Bipolar: means that two electrodes are used for recording the ECG. They are:-
- Lead I:
 - Connects right arm (-ve) & left arm (+ve)
- Lead II:
 - Connects right arm (-ve) & left leg (+ve)
- Lead III:
 - Connects left arm (-ve) & left leg (+ve)



Einthoven's Triangle

- The standard limb leads can be represented by Einthoven triangle. The heart is considered to lie in center (the triangle is drawn around the area of the heart).
- The two apices at the upper part of the triangle represent the points at which the two arms connect electrically
- The lower apex is the point at which the left leg connects



Einthoven's Law

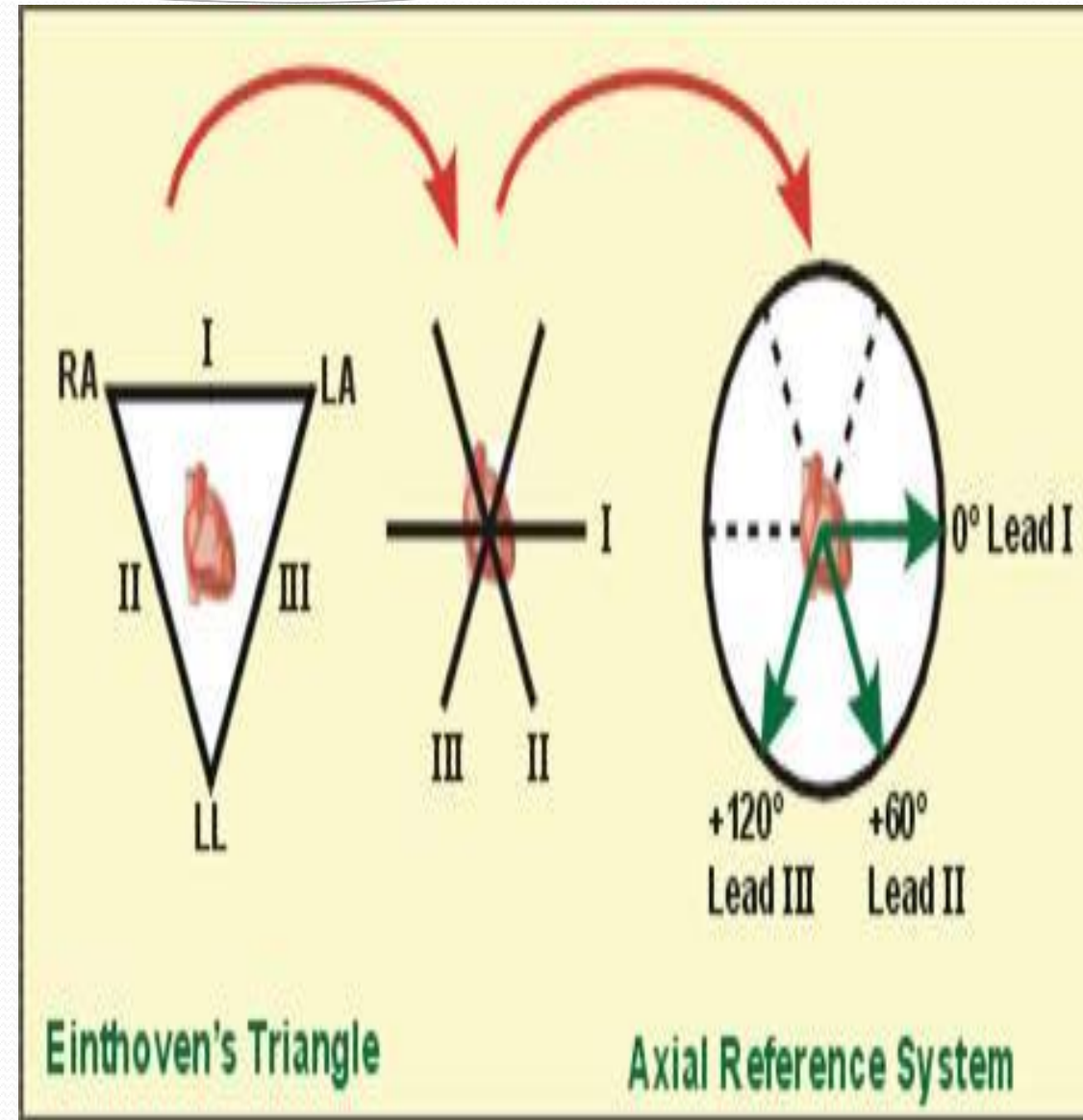
- **Einthoven's Law**: if the electrical potential of any two of the three bipolar limb leads are known, the third one can be determined mathematically by summing the first two (note the +ve and -ve signs)

Einthoven's law

The sum of the voltage in Lead I + Lead III = Lead II

Hexagonal reference system

- The direction of axis of 3 standard limb leads can be represented by 3 intersecting lines:-
 - The axis of lead I is 0 degree
 - The axis of lead II is 60 degree
 - The axis of lead III is 120 degree.



Augmented Unipolar Leads

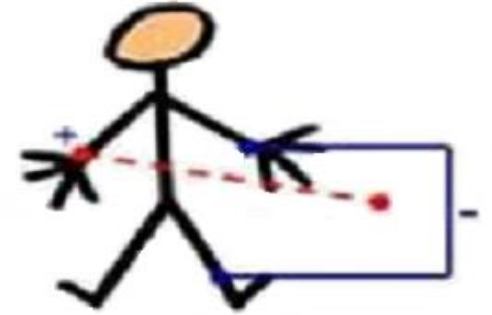
- ECG record is by using an active or exploring electrode connected to an indifferent electrode at zero potential.
- One limb is connected to the positive terminal of the ECG.
- The other two limbs are connected to the negative terminal of the ECG.
- These are aVR, aVL, aVF
- All are similar to the standard limb leads
- aVR lead is inverted



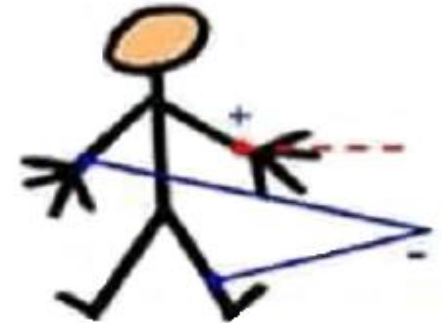
Augmented Unipolar Leads.....Cont.

- They labeled according to limb to which the exploring (positive) terminal of machine is connected.
- When the positive terminal is connected to right arm and other electrode is connected to other 2 limbs = **aVR**.
- When the positive terminal is connected to left arm and other electrode is connected to other 2 limbs = **aVL**.
- When the positive terminal is connected to left foot and other electrode is connected to other 2 limbs = **aVF**.
- Letter (a) means augmentation i.e. \uparrow magnitude of recording 1.5 times.

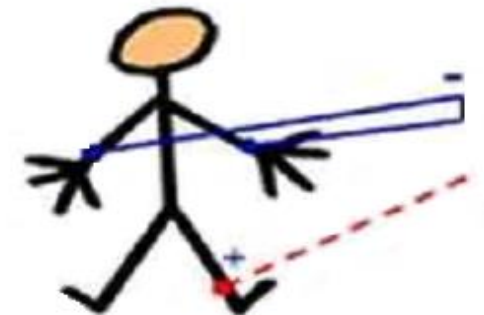
AVR: Augmented voltage right arm



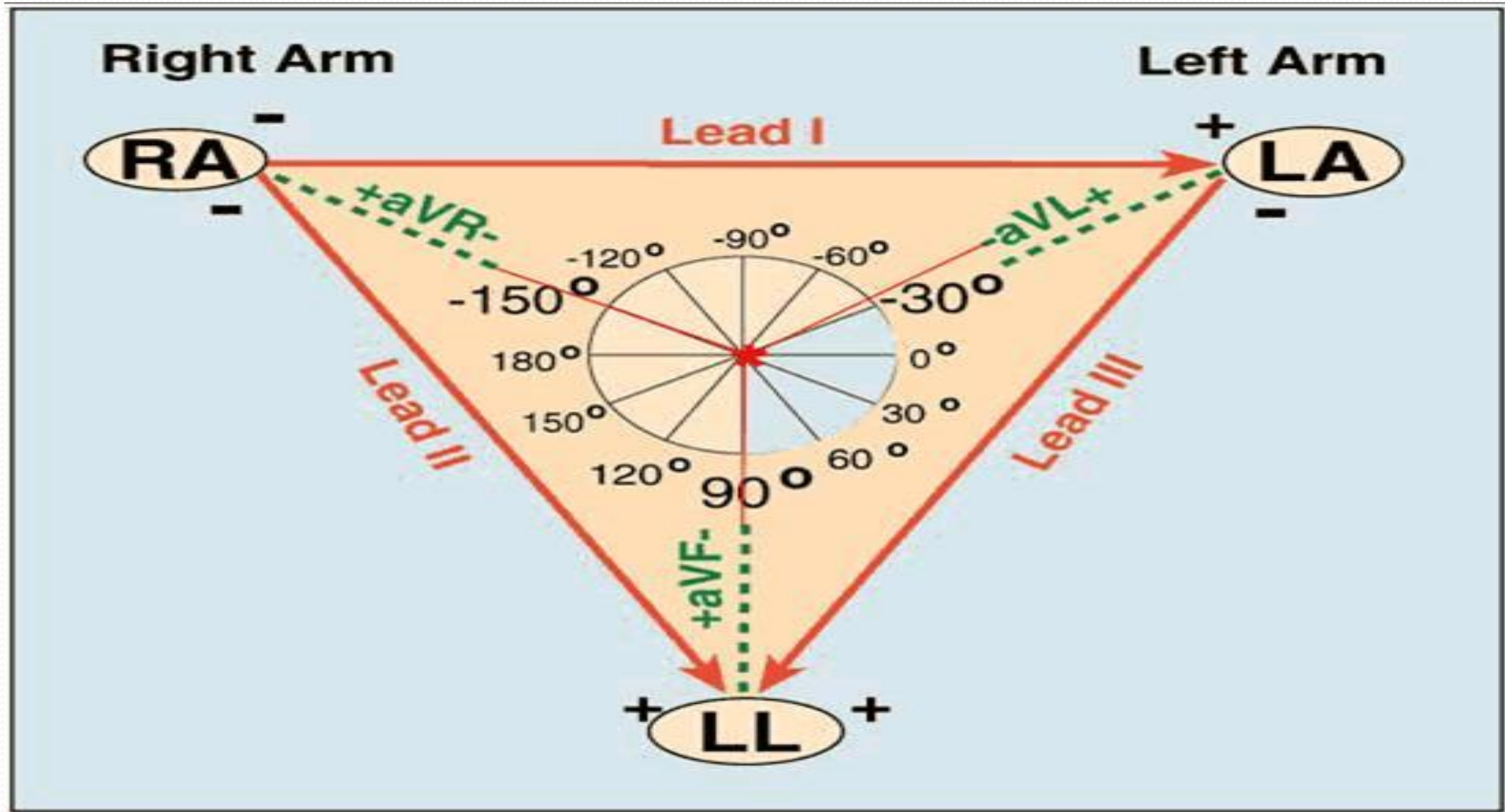
AVL : Augmented voltage left arm



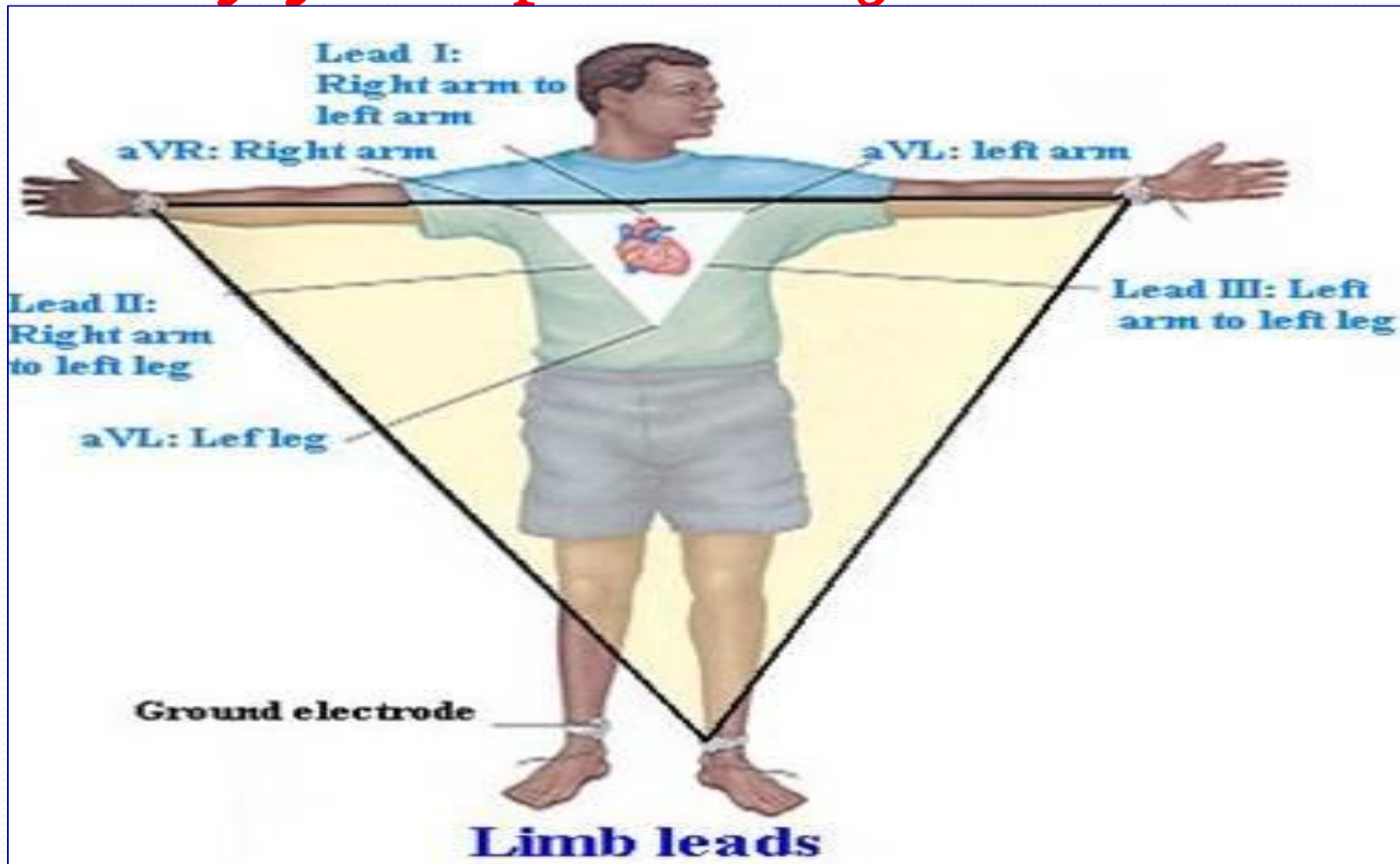
AVF : Augmented voltage left foot



Summary of The Bipolar & Augmented limb Leads

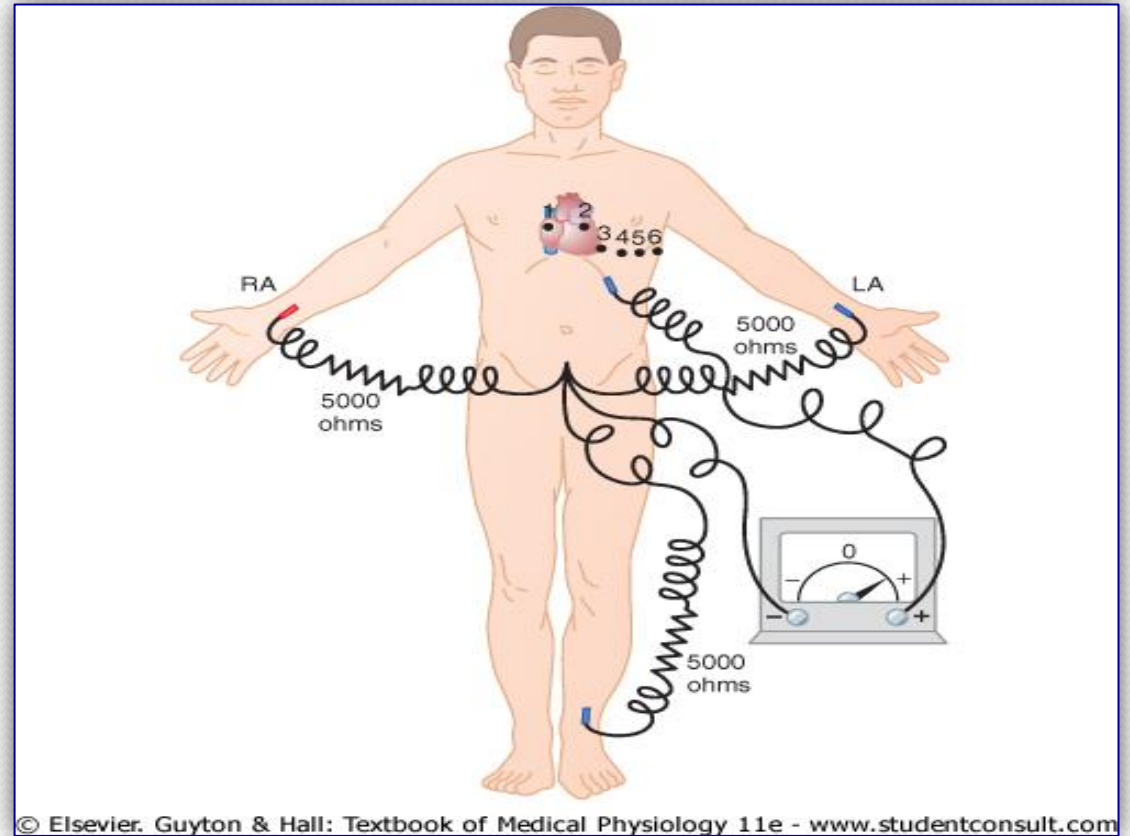


Summary of The Bipolar & Augmented limb Leads



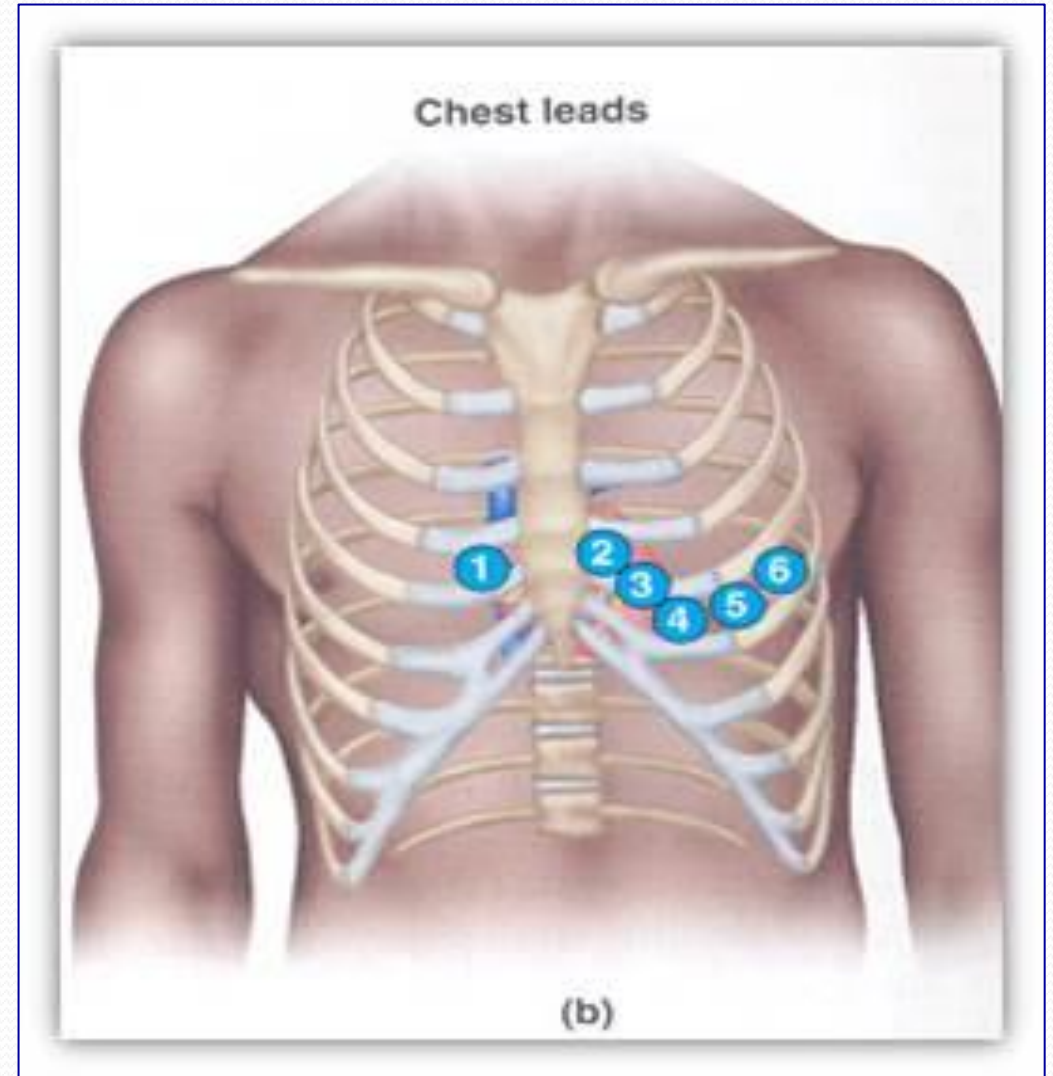
Chest Leads

- Exploring (positive) electrode is placed on chest
- The indifferent (negative) electrode is connected to the 3 limbs:- the right arm, left arm, and left leg.
- They include leads V I-6.



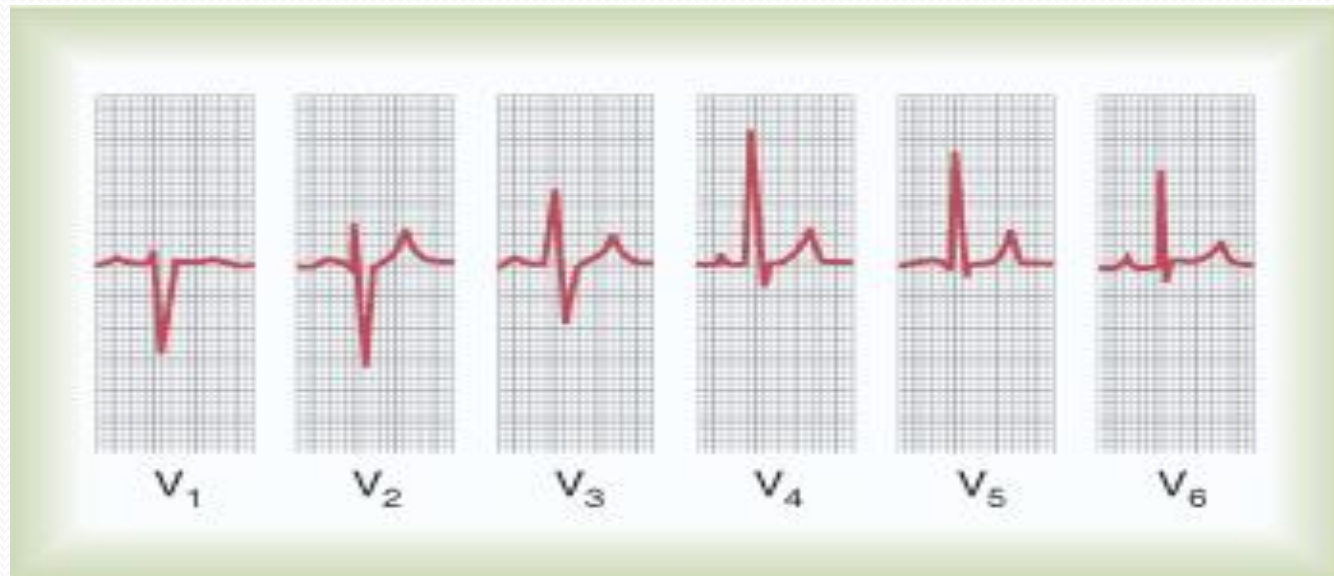
Chest Leads...Cont.

- V1:- At right 4th intercostal space near sternum.
- V2:- At left 4th intercostal space near sternum.
- V3:- Midway between V2 & V4.
- V4 :- At left 5th intercostal space at midclavicular line.
- V5 :- At left 5th intercostal space at anterior axillary line.
- V6 :- At left 5th intercostal space at midaxillary line.



Chest Leads.....Cont.

- V1 and V2: QRS are mainly negative because the chest leads are nearer to the base of the heart (electronegative).
- V3, V4 and V6 are mainly positive because the chest electrode are nearer to the apex (electropositive).



Name:

ID:

Patient ID:

Incident:

Age: 26

Sex:

12-Lead 2

PR 0.138s

QT/QTc

P-QRS-T Axes

aVR

HR 62 bpm

14:37:18

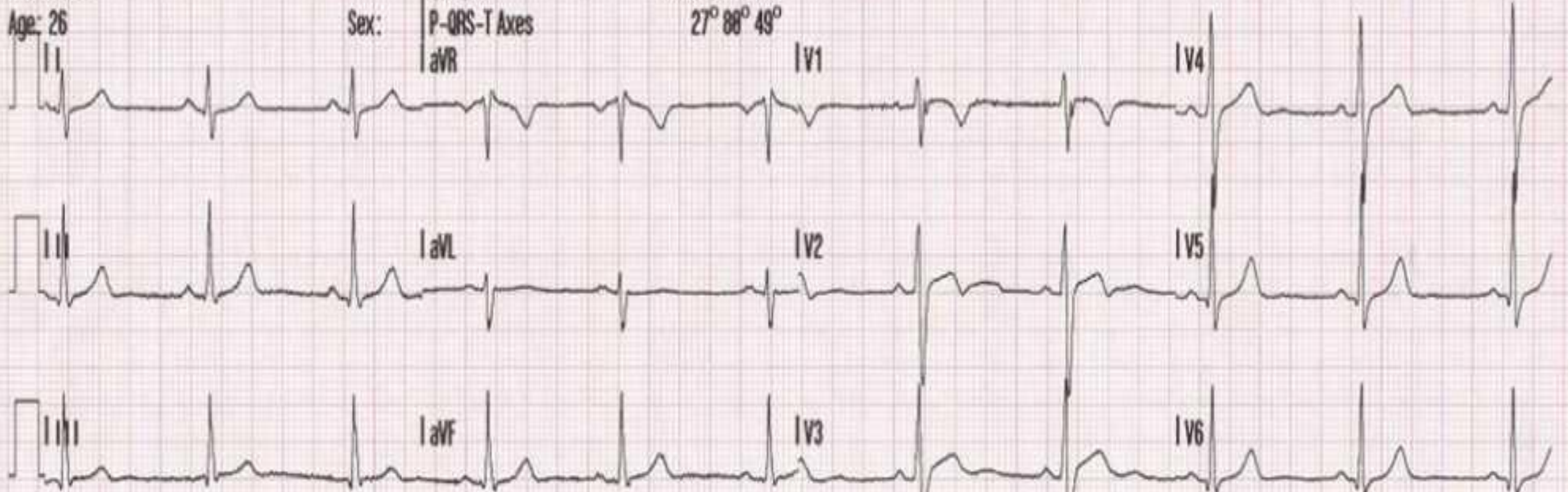
QRS 0.112s

0.390s/0.395s

27° 88° 49°

• Normal ECG ****Unconfirmed****

• Normal sinus rhythm



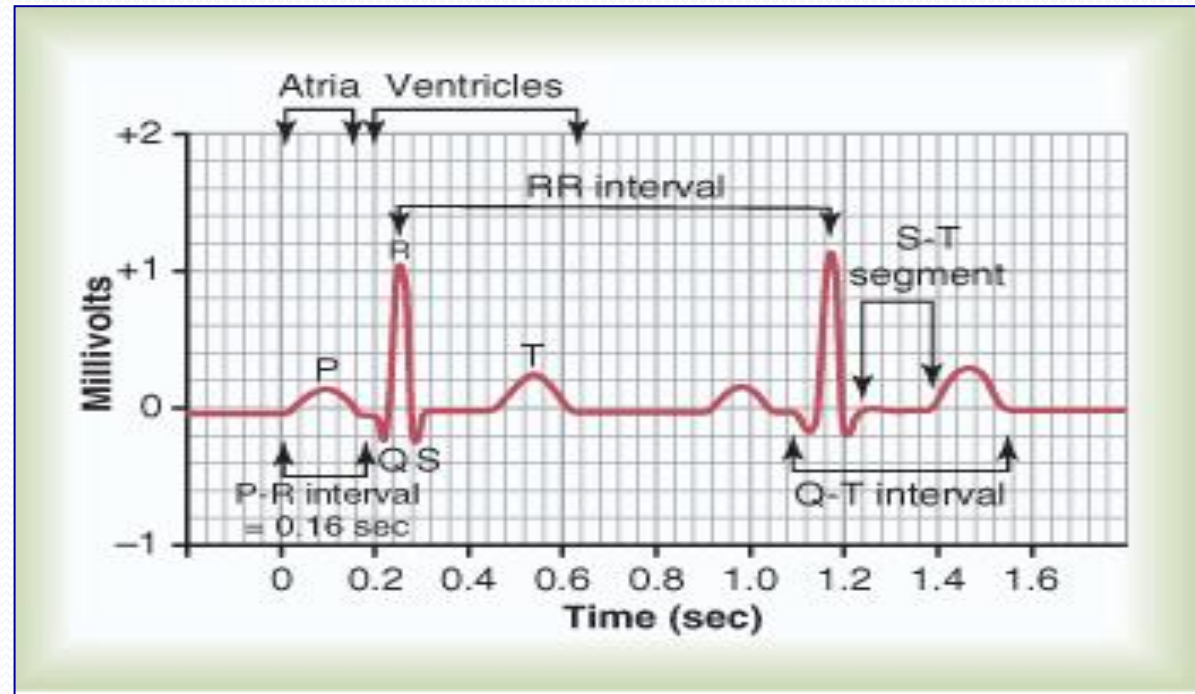
x1.0 .05-150Hz 25mm/sec

DATE/TIME I I C A

DATE/TIME

Practical use of the ECG

- Heart rate
- Normal intervals
- Rhythm
 - Regular
 - Single p-wave precedes every QRS complex
 - P-R interval is constant and within normal range
- Cardiac Axis



For further readings and diagrams:

Textbook of Medical Physiology by Guyton & Hall

Chapter 11 (The Normal Electrocardiogram)



Thanks!

spicecomments.com