

# INAPPROPRIATE SINUS TACHYCARDIA

## What is Inappropriate Sinus Tachycardia?

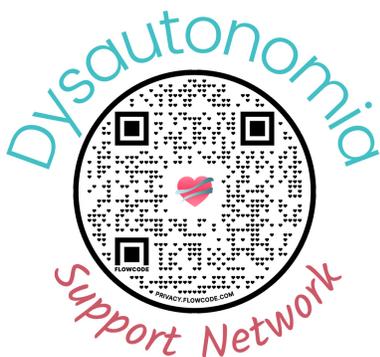
Inappropriate Sinus Tachycardia (IST) is a chronic condition where the individual's heart rate is **above 100 beats per minute (bpm) at rest**.<sup>1</sup> Typically, a normal heart rate is between 60-100 beats per minute (bpm).<sup>2</sup> The word "sinus" refers to a sinus heart rhythm, which is the normal, healthy type of heart rhythm.<sup>3</sup> This means that in IST, the heart is beating in its normal rhythm but is consistently beating at a higher than normal rate.

Unlike many of the other forms of dysautonomia, **IST is not a form of orthostatic intolerance**.<sup>1</sup> This means that the symptoms and elevated heart rate are not dependent on position. However, with IST minimal exertion (regardless of positional changes) can cause the heart rate to increase excessively.<sup>1,4</sup>

## Symptoms

The most prominent symptom of IST is **palpitations**.<sup>1,4</sup>

Other symptoms include weakness, fatigue, dizziness, exercise intolerance, shortness of breath, presyncope, and syncope.<sup>1,5,6</sup>



For references, please scan the QR code. (C) 2022

## Incidence/Prevalence

According to recent estimates, **1.2% of the population** has IST.<sup>1</sup>

## Diagnosis

Diagnostic Criteria:<sup>1</sup>

- Average heart rate must be **above 90 bpm for a 24 hour time period**, including rest
- The heart rate must be in a sinus rhythm.
- Other causes of tachycardia must be ruled out.
- The patient must experience distressing symptoms of palpitations

Diagnosis of IST is a diagnosis of exclusion, meaning other causes of high heart rate are looked into and excluded prior to getting the diagnosis of IST.<sup>4,6</sup>

The most common tests used to diagnose IST are a 12 lead EKG and a 24-hour Holter monitor.<sup>1</sup>

## Treatment

As with many other forms of dysautonomia, first-line treatments for IST are **lifestyle changes** which include avoiding triggers of IST and stimulant medications.<sup>4</sup>

Beyond this, some medications that lower heart rate are often used to manage symptoms (**particularly Ivabradine**).<sup>1,7</sup> Ivabradine may also be used in collaboration with a beta-blocker.<sup>7</sup>

Sinus node modification in routine cases is not recommended by the current consensus statement for IST.<sup>1</sup>

*Like many other forms of dysautonomia, more research is needed in this area.*



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