

Effect of atenolol on heart rate, arrhythmias, blood pressure, and dynamic left ventricular outflow tract obstruction in cats with subclinical hypertrophic cardiomyopathy - PubMed

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Abstract

Objective: To investigate the negative chronotropic, antiarrhythmic, and obstruction-relieving effects of atenolol in cats with subclinical hypertrophic cardiomyopathy (HCM).

Animals: Seventeen cats with HCM.

Methods: Results for echocardiography, electrocardiography, Doppler blood pressure, and 24 h Holter monitoring were compared in cats before and 2-4 weeks after atenolol therapy (6.25-12.5 mg PO q 12 h).

Results: The left ventricular outflow tract maximum velocity (LVOT Vmax) decreased after atenolol administration (mean Vmax pre-treatment $3.3 \text{ m/s} \pm 1.8 \text{ m/s}$; post-treatment $1.6 \text{ m/s} \pm 1.0 \text{ m/s}$, $p < 0.0001$). Heart rate (HR) decreased after atenolol for all HR modalities. The total number of

ventricular origin complexes (TotVent) and ventricular premature complexes (VPCs) decreased after atenolol. The VPCs decreased from a geometric mean of 61 complexes/24 h (range, 11-620 complexes/24 h) to 15 complexes/24 h (range, 1-1625 complexes/24 h) ($p < 0.0001$). Murmur grade decreased after atenolol from a median grade of 3/6 to 2/6 ($p < 0.0001$). The systolic blood pressure did not change (mean pre-treatment 130 mmHg \pm 16 mmHg, mean post-treatment 123 mmHg \pm 20 mmHg, $p = 0.2$).

Conclusion: Atenolol decreases HR, murmur grade, and LVOT obstruction, and to a lesser degree, frequency of ventricular ectopy, in cats with subclinical HCM. Further studies are needed to determine if sudden cardiac death or long-term outcome is influenced by atenolol administration.

Keywords: Beta blocker; Echocardiography; Feline; Holter monitor.

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