

Sir,

We have read with great interest the case report^[1] which once more demonstrates that type I antiarrhythmic drugs are to be preferred in the treatment of ectopic tachycardias; verapamil, on the other hand, may aggravate such arrhythmias.

To explain the arrhythmogenic effect of verapamil, the authors hypothesize that this was mediated through the haemodynamic effect of the drug, namely hypotension. We would doubt that this is the mechanism. Indeed, studying the effect of verapamil in children after open heart surgery (*Am J Cardiol* 1987; 60: 692), we have recently demon-

strated the emergence of ectopic pacemakers as a direct effect of verapamil. In the case of Wren *et al.*, the exacerbation of an ectopic pacemaker is the probable mechanism.

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[1] Wren C, Campbell RWF. HIS bundle tachycardia — arrhythmogenic and antiarrhythmic effect of therapy. *Eur Heart J* 1987; 8: 647–50.