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Objective It has been reported that Adrenergic beta stimulation attenuated ST-elevation and ventricular arrhythmia and electrical storm was suppressed by treatment with low-dose isoproterenol (Iso) in some cases of Brugada syndrome. However, there have been few systematic studies on ionic mechanisms of the effects of isoproterenol.

Methods Single epicardial myocytes of right ventricle of the rabbits were isolated with enzymatic dissociation. The whole-cell patch clamp recording technique was used to observe the effect of 1 μ M Iso on action potential duration (APD), type calcium current ($I_{Ca,L}$) and transient outward potassium current (I_{to}) in epicardial myocytes of right ventricle of the rabbits.

Results (1) Iso significantly prolonged APD₂₀, D₅₀ and APD₉₀ from (151.3 \pm 11.8)ms, 68.7 \pm 27.3 ms and (380.9 \pm 34.6) ms to (195.4 \pm 13.3) ms, (324.5 \pm 32.8) ms and (423.5 \pm 42.1) ms (n=14, p<0.05), respectively. (2) At +60 mV, I_{to} decreased from (11.4 \pm 1.7) pA/pF to (6.3 \pm 0.5) pA/pF (n=16, p<0.05) after 1 μ M Iso. 1 μ M Iso downshifted the I-V curves of I_{to} without changes of their active, peak and reverse potentials; 1 μ M Iso turned the steady-state inactivation curve to left and the curve of time recovery from inactivation of I_{to} moved right. $V_{1/2,act}$ and k_{act} of I_{to} had no significant difference before and after 1 μ M Iso. (3) 1 μ M Iso increased peak $I_{Ca,L}$ from (-6.1 \pm 0.6) pA/pF to (-8.6 \pm 0.9) pA/pF (n=10, p<0.05), respectively. 1 μ M Iso downshifted the I-V curves of $I_{Ca,L}$ without changes of their active, peak and reverse potentials.

Conclusions Iso could prolong APD, especially APD₂₀ and APD₅₀; Iso blocked I_{to} in a voltage dependent manner and probably inhibited I_{to} in its inactive state; Iso augmented $I_{Ca,L}$ in a voltage dependent manner, which could be an important mechanism to suppress ventricular arrhythmia and electrical storm of Brugada syndrome.

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STUDIES ON IONIC MECHANISMS OF THE EFFECTS OF ISOPROTERENOL ON BRUGADA SYNDROME

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