

TdPs-like VT/VF) in low iCEB and Torsades de Pointes (TdPs) in high iCEB. We also investigated low voltage ECG among COVID-19 group.

Methods and Results: This is a cross-sectional, single center study with a total of 53 newly diagnosed COVID-19 patients (confirmed with polymerase chain reaction (PCR) test) and 63 age and sex-matched control subjects were included in the study. Electrocardiographic marker of iCEB were calculated manually from 12-lead ECG. Low voltage ECG defined as peak-to-peak QRS voltage less than 5 mm in all limb leads and less than 10 mm in all precordial leads. Patients with COVID-19 more often had low iCEB, defined as iCEB below 3.24 compared to control group (56.6% vs 11.1%), (OR = 10.435; 95%CI 4.015 - 27.123; p = 0.000). There were no significant association between COVID-19 and high iCEB, defined as iCEB above 5.24 (OR = 1.041; 95%CI 0.485 - 2.235; p = 0.917). There were no significant difference of the number of low voltage ECG between COVID-19 and control groups (15.1% vs 6.3%), (OR = 2.622; 95%CI 0.743 - 9.257, p = 0.123).

Conclusion: In this study showed that patients with COVID-19 are more likely to have low iCEB, suggesting that patients with COVID-19 may be proarrhythmic (towards non-TdPs-like VT/VF event), due to the alleged myocardial involvement in SARS-CoV-2 infection.

Keywords: COVID-19 • arrhythmia • non-TdPs-like VT/VF • TdPs • iCEB.

OR47. Index of Cardiac Electrophysiological Balance (iCEB) in Patients with COVID-19

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Aims: We aimed to examine whether there is abnormal value of index of cardiac electrophysiological balance (iCEB=QT/QRS) in patients with confirmed coronavirus disease 2019 (COVID-19), which can predict ventricular arrhythmias (VAs), including non-Torsades de Pointes-like ventricular tachycardia/ventricular fibrillation (non-