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Atrial fibrillation and what else?

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A 56-year-old male with no pertinent medical history was referred to the emergency department with dyspnoea and fever due to COVID-19 pneumonia. At presentation oxygen saturation was 88%, necessitating supplemental oxygen and hospital admission. Due to a fast and irregular pulse, an electrocardiogram was recorded, which revealed atrial fibrillation (AF) but no other abnormalities (Fig. 1a). The patient experienced no symptoms associated with AF and the duration of AF was unknown. Metoprolol 50mg twice daily was initiated with the aim of rate control. To achieve better rate control metoprolol was uptitrated to 100mg thrice daily and digoxin was added. However, after higher doses of metoprolol and digoxin, rhythm monitoring showed repetitive bursts of wide complex tachycardia (Fig. 1b).

What is your diagnosis based on these electrocardiograms?

Answer

You will find the answer elsewhere in this issue.

Conflict of interest S.M. van den Bogaard, F.E. Vervaat and P.H. van der Voort declare that they have no competing interests.

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Fig. 1 **a** ECG at hospital admission showing atrial fibrillation; **b** ECG with repetitive bursts of wide complex tachycardia after metoprolol and digoxin. ECG electrocardiogram