

IRREGULAR HEART BEAT

The heart beat is normally quite regular. Irregularity of the heart beat is called an arrhythmia. It can be felt by the individual as a palpitation or detected by checking the pulse. The irregularity may be constant or it may be intermittent or paroxysmal (comes and goes). If it is constant, it can be seen in the electrocardiogram (ECG). However, a 24 hour Holter monitor may be necessary for further evaluation. Some of the common types of irregular heart beats are discussed below.

Sinus arrhythmia is the variation of heart rhythm with breathing. The heart beat quickens on breathing in and slows on breathing out. This variation may be quite pronounced in trained athletes. This is a normal response of the heart and is not rated.

Premature supraventricular or atrial beats (PAC's) arise in the upper chamber (the atrium) of the heart. These are benign and are not rated.

Premature ventricular beats (PVC's) originate in the lower, pumping chamber (the ventricle) of the heart. When isolated, and in the absence of heart disease, PVC's do not pose a significant risk. PVC's of an unfavorable nature may include one or more of these features: association with any type of heart disease, origin from several different regions of the ventricle (multi-focal), increase in frequency with exercise, bigeminy (every other beat is a PVC), trigeminy (every third beat is a PVC), or ventricular tachycardia (a run of three or more PVC's in a row). The rating will depend on the frequency and complexity of the PVC's and the presence of underlying heart disease.

General Rating Guidelines when there is no other significant impairment:

PVC's 20 or less per minute	Non-rated
PVC's over 20/min, multifocal, couplets, bigeminy, trigeminy	Table B*
PVC's with exercise, infrequent	Non-rated
PVC's with exercise, frequent, in runs, or multifocal	Minimum Table C

*Credits to lower the rating may be given for age under 40 years, or for work-up of a minimum of a normal echocardiogram and stress test.

Atrial flutter or fibrillation (AF) may be paroxysmal (intermittent) or chronic (permanent). See Rx for Success, #44.

To get an idea of how a client with a history of an irregular heart beat would be viewed in the underwriting process, feel free to use the *Ask "Rx"pert's* on the reverse side for an informal quote.

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This material is intended for insurance informational purposes only and is not personal medical advice for clients.



Irregular Heart Beat - Ask "Rx" perts
(ask our experts)

Broker _____ Phone _____ FAX _____
Client _____ Age/DOB _____ Sex _____

If your client has a history of irregular heart beat(s), please answer the following:

- ① Please list date when first diagnosed: _____
- ② Is the irregular heart beat due to (check all that apply):
- premature supraventricular atrial beats (PAC's)
 - premature ventricular beats (PVC's)
 - multifocal
 - bigeminy or trigeminy
 - ventricular tachycardia
- ③ Are there any symptoms with the irregular heart beat?
- black-out
 - dizziness (light-headedness)/faint feeling
 - palpitations
 - chest discomfort
- ④ Have any of the following tests been done? If so, please give date and results:
- ECG _____ stress test _____
 - echocardiogram _____ Holter monitor _____
- ⑤ Is your client on any medications?
- yes, please give details _____
 - no
- ⑥ The cause of the irregular heart beat is due to:
- heart disease alcohol
 - thyroid disease unknown
- ⑦ Has your client smoked cigarettes in the last 12 months?
- yes
 - no
- ⑧ Does your client have any other major health problems (example: stroke, etc.)?
- yes, please give details _____
 - no

After reading the *Rx for Success* on Irregular Heart Beat, please feel free to use this *Ask "Rx" perts* for an informal quote.

