

mean age, 61 years) were observed during the last 4 years. Coronary artery disease was diagnosed by clinical and ECG data and/or history of myocardial infarction. SMI was detected by ambulatory 24-hour ECG monitoring and VD were compared during periods with and without SMI. VD were classified in Lown's grades. The table summarizes the results.

Ambulatory ECG Periods	Lown's Grade			
	I/II	III	IV A	IV B
With SMI	24 (34%)	6 (8%)	5 (7%)	3 (4%)
Without ischemia	30 (42%)	10 (14%)	1 (1%)	1 (1%)

Conclusion. High-grade VD were more prevalent during periods of SMI, compared with periods without myocardial ischemia.

Ventricular Dysrhythmias During Silent Myocardial Ischemia

F. Pinto, M. Fiuza, E. Dias, J. Correia, P. Pedro, F. Ribeiro, F. de Pádua, University Center of Cardiology, Lisbon, Portugal

To analyze the prevalence of ventricular dysrhythmias (VD) during periods of silent myocardial ischemia (SMI), 71 consecutive patients with SMI (49 men, 22 women;