1. Title: ECG Findings ARIC Ppts on Ca+ Blocking Agents

2. Writing Group:
   
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3. Timeline:

   As quickly as possible.

4. Rationale:

   Several recent meeting presentations and publications have suggested a possible causal relationship between use of the calcium channel blocking agents to treat hypertension and the occurrence of myocardial infarction. In view of these concerns, we thought it might be worthwhile to compare non-myocardial infarction ECG findings in the ARIC participants on calcium channel blocking agents versus those not on these drugs. Our large participant population makes ARIC ideal for this purpose. We realize however, that our findings could not be considerably influenced by drug indication biases. We will attempt to adjust for these in our analyses.

5. Main Hypothesis:

   There will be a greater prevalence of selected ECG abnormalities in ARIC participants receiving calcium channel blocking agents than in those not receiving this class of drugs.

6. Data (variables, time window, source, inclusions/exclusions):

   Mean QT interval, mean QRS duration, mean heart rate, percent with bradycardia (HR less than 50/min), mean PR interval and percent with first degree AV block, percent with right and left bundle branch block isolated abnormalities ST-T and LAD (excluding all participants with ECG diagnosis of myocardial infarction or history thereof, as well as all receiving antiarrhythmic medication or digitalis preparations).