

Leaping to Diagnosis: The Frog Sign as a Key Clue in AVNRT

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Case Presentation:

A 79-year-old female presented with episodes of vertigo and palpitations. A notable "frog sign" was observed, characterized by prominent cannon A waves in the jugular and subclavian veins due to atrial contraction against a closed tricuspid valve. Cannon A waves are typically seen in AVNRT and less commonly in other supraventricular arrhythmias, tricuspid regurgitation, ventricular tachycardia, complete heart block, and

pacemaker syndrome (1,2). The ECG revealed a regular, narrow-complex tachycardia without visible P-waves, raising suspicion for AVNRT. The diagnosis was confirmed by an electrophysiological study, and radiofrequency ablation was performed successfully. During follow-up, no further symptoms were reported.

References:

1. González-Casal D, Perez-Castellanos A, Flores NS, Carta-Bergaz A, Gonzalez-Torrecilla E, Bruna Fernandez V, et al. Cannon A wave validation as a diagnostic tool in paroxysmal supraventricular tachycardias. *Pacing Clinical Electrophis.* mars 2024;47(3):383-91.
2. Ho C, Ho R. The Frog Sign Revisited. *J Innov Cardiac Rhythm Manage.* 1 oct 2022;13(10):5184-7.