Marked bradycardia
Stress cardiomyopathy

5. Endocrine disorders
   - Hypothyroidism
   - Hyperparathyroidism
   - Pheochromocytoma
   - Hyperaldosteronism

6. Intracranial disorders
   - Subarachnoid hemorrhage
   - Thalamic hematoma
   - Cerebrovascular accident
   - Encephalitis
   - Head injury

7. Nutritional disorders
   - Anorexia nervosa
   - Starvation
   - Liquid protein diets
   - Gastroplasty and ileojejunal bypass
   - Celiac disease

■ CONGENITAL LONG QT SYNDROME

The congenital long QT syndrome (LQTS) is caused by mutations in genes coding for cardiac ion channels responsible for ventricular repolarization. The corrected QT (QTc) is typically prolonged to >440 ms in men and 460 ms in women. Symptoms are due to torsades des pointes VT. Several forms of congenital LQTS have been identified, but three groups of mutations that lead to LQTS-1, LQTS-2, and LQTS-3 syndromes account for 90% of cases. The most frequently encountered mutations (LQTS-1 and LQTS-2) are due to abnormalities of potassium channels, but mutations affecting the sodium channel (LQTS-3) and calcium channels have also been described.

Typical presentation is with syncope or cardiac arrest, usually during childhood. In LQTS-1, episodes tend to occur during exertion, particularly swimming. In LQTS-2, sudden auditory stimuli or emotional upset predisposes to events. In LQTS-3, sudden death