The primary goals of treating arrhythmias include terminating existing arrhythmias and preventing their _____.	recurrence
To protect the ventricles during atrial arrhythmias, treatment aims to restore normal _____ rhythms and prevent _____ arrhythmias.	sinus, recurrence
Non-pharmacological approaches to manage cardiac arrhythmias include pacemakers, catheter ablation, and _____ shock for cardioversion.	DC (direct current) electrical
Antiarrhythmic drug therapy includes Na channel blockers like Lignocaine and _____ blockers such as Metoprolol.	beta
Type IA anti-arrhythmic drugs include ____ and ____.	Disopyramide, Procainamide

Type IB anti-arrhythmic drugs are represented by ____ and ____.	Lidocaine, Mexiletine
Type III anti-arrhythmic drugs consist of ____ and ____ among others.	Amiodarone, Bretylium
Type IV anti-arrhythmic drugs include nondihydropyridine calcium channel antagonists like ____ and ____.	verapamil, diltiazem
In the context of antiarrhythmic drugs, blocking Na+ channels helps in ____ activity and ____ abnormal automaticity.	suppressing, terminating
Blocking K+ channels in ventricular muscles leads to ____ AP duration and ____ ERP.	prolonged, increased

Class I antiarrhythmic drugs affect the ventricular action potential by altering the ____ and ____ intervals on an ECG.	QT, QRS
Additional autonomic actions of certain antiarrhythmic drugs include ____ like action and ____ blocking action.	atropine, alpha-adrenergic
In the treatment of supraventricular arrhythmias, quinidine is used for the prevention of recurrence of _____ and _____.	atrial fibrillation, atrial flutter
Quinidine can be co-administered with _____ and _____ for effective management of atrial fibrillation.	anti-coagulants, beta blockers
For ventricular arrhythmias, quinidine is effective in treating _____ and preventing recurrence of _____ after cardioversion.	ventricular extrasystole, paroxysmal ventricular tachycardia

In addition to arrhythmias, I.V. quinidine may also be used in the treatment of _____ during acute cases.	malaria
Before treating atrial fibrillation, we need to decrease A-V nodal conduction using ____ or ____ to protect the ventricles.	3-blockers, Ca++ channel blockers
Atrial fibrillation is often associated with stagnation of blood leading to ____ in the atrium, so we use ____ drugs.	thrombosis, anticoagulant
To restore sinus rhythm in atrial fibrillation, we use a procedure called ____ which is known as ____ .	cardioversion, termination
After correcting atrial fibrillation, maintaining sinus rhythm can be achieved with medications like ____, ____ or ____ .	quinidine, amiodarone, dofetilide

Quinidine can cause ____ toxicity, leading to symptoms like recurrent light headedness and ____.	cardiac, syncope
One of the serious effects of quinidine is ____ de pointes, which is characterized by ____ ventricular tachycardia.	Torsade, polymorphic
Quinidine may lead to embolism due to ____ standing atrial fibrillation, causing dislodged ____ during rhythm conversion.	old, thrombi
In some cases, quinidine can produce ____ actions, resulting in an increased ventricular rate and ____ ventricular tachycardia.	atropine-like, paradoxical
Extracardiac toxicity can include GIT issues such as _____ and _____.	nausea, vomiting

Cinchonism, derived from the cinchona plant, can cause symptoms like _____ and _____.	tinnitus, hearing loss
Hypersensitivity reactions may lead to symptoms such as _____ and _____.	fever, thrombocytopenia
Quinidine can increase serum digoxin levels, enhancing its toxicity by _____ and _____.	displacement from tissue binding, decreasing renal excretion
Quinidine is contraindicated in patients with ____ and ____ due to worsening effects.	AV conduction block, hypotension
A history of ____ and ____ are important contraindications for quinidine use.	embolism, old standing atrial fibrillation

Disopyramide differs from quinidine as it has no ____ blocking activity and more ____ activity.	a-adrenergic receptors, anti-cholinergic
Patients with ____ and ____ should be cautious when using quinidine due to potential aggravation of their conditions.	congestive heart failure, myasthenia gravis
Procainamide is similar to quinidine in pharmacological effects but lacks the ____ action and is better tolerated when given ____ infusion.	atropine-like, I.V.
One of the side effects of Procainamide is that it may cause a ____-like syndrome in 30% of patients, especially in ____ acetylators.	SLE, slow
Procainamide is metabolized in the liver by ____, and there are both fast and ____ acetylators.	acetylation, slow

Unlike quinidine, Procainamide does not cause ____, but it can cause more ____ due to blocking of alpha-adrenergic receptors.	Cinchonism, hypotension
Lidocaine is a local anesthetic and anti-arrhythmic drug that works by blocking ____ and ____ channels.	activated, inactivated Na+
Lidocaine is particularly effective in suppressing arrhythmias associated with ____ and ____ toxicity.	ischemia, digitalis
The therapeutic doses of Lidocaine do not affect ____ or ____ resistance.	contraction, vascular
Lidocaine has a rapid onset and short duration of action, making it suitable for ____ arrhythmias and has a half-life of ____ hours.	emergent ventricular, 2

Lidocaine is used intravenously for ventricular arrhythmias caused by _____ and _____ .	Myocardial infarction, Open heart surgery
Adverse effects of lidocaine include CNS stimulation such as _____ and _____ , followed by CNS depression.	confusion, tremors
Tocainide is a lidocaine analog that is administered _____ and may cause _____ and _____ as major adverse effects.	orally, tremor, nausea
Mexiletine is similar to lidocaine in actions but is given _____; it may cause _____ and _____ as side effects.	orally, dizziness, nausea
Phenytoin is an antiepileptic and antiarrhythmic drug that blocks the inactivated cardiac ____ channels and has a depressant effect on the ____ centers in the CNS.	Na+, sympathetic

Subgroup 1C includes drugs like Flecainide and Propafenone, which are known for blocking ____ channels in all cardiac cells and are used for treating ____ tachyarrhythmia.	Na+, ventricular
The use of Subgroup 1C drugs can lead to side effects such as aggravating preexisting ____ or inducing a new one, and they may increase the incidence of ____ death.	arrhythmia, sudden
Wolff Parkinson White Syndrome (WPWS) is associated with the anomalous conduction in the ____ pathway, which can be treated with potent antiarrhythmic drugs like ____ and Moricizine.	A-V, Flecainide
Beta-adrenergic blockers like propranolol and metoprolol are used to treat ____ and ____.	supraventricular arrhythmias, sinus tachycardia
The mechanism of beta-adrenergic blockers involves blocking beta adrenoceptors in ____ and also blocking ____ channels in propranolol.	cardiac tissues, sodium