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LETTER TO THE EDITOR

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The article by Asensio Lafuente et al. 1 is a complete and detailed review of cardiac sinus syndrome (CSS), but it contains two aspects worthy of discussion: the first refers to the idea that diagnosis \ll is usually overlooked and the second deals with the treatment options in relation to the vasodepressor component.

We look for CSS in all cases of syncope, respecting the contraindications referred to in the article and after careful examination of both carotid arteries of the patient, including: palpation, auscultation, and ultrasound and Doppler study (included, in fact, as part of the initial examination of all our patients). Our experience is that of the private healthcare sector, but 20% of the pacemakers we have placed are due to CSS.

Regarding the vasodepressor component, I cite our article² that compares two groups of patients with CSS, treated through pacemaker and unilateral surgical denervation. This treatment was found to be easy, safe, and more effective and economic and therefore we recommend it in patients that do not have high blood pressure.

REFERENCES

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