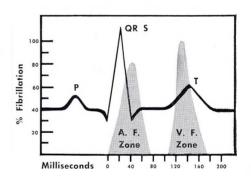
Drug resistant ventricular tachycardia responded to single synchronized discharge. First normal complex appears in about 2 seconds after shock.

The use of alternating current countershock for the treatment of ectopic arrhythmias has been limited and regarded as an emergency measure for refractory life threatening disorders of rhythm. The random electrical discharge could coincide with the apex of the T wave (vulnerable period), thus inducing ventricular fibrillation. The Lown Cardioverter permits placement of a direct-current electrical impulse, delivered from a capacitor, at any predetermined point in



Fibrillation danger zone charted on EKG.

the cardiac cycle safely outside this vulnerable phase (see chart). The heart is depolarized instantly, thereby extinguishing the ectopic site and permitting resumption of sinus rhythm without danger of ventricular fibrillation or of any other arrhythmia.

This revolutionary method of treatment has numerous advantages over the use of drugs. It has proved effective in many disorders previously unresponsive to antiarrhythmic agents. It is simple in application and immediate in result. There is no depression in cardiac contractility or excitability. It requires no clinical differentiation between ventricular and supraventricular tachycardias.

- \*1. Lown, B., et al.: New Method for Terminating Cardiac Arrhythmias, Journal of the American Medical Association, November 3, 1962, Vol. 182, pp. 548-555.
- 2. Editorial, Journal of the American Medical Association, November 3, 1962, p. 566.



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