Summary & Conclusion
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1. Males represented 49.9% of persons in rural areas and females were 50.1%. Similar was the distribution of males and females in the urban areas. Females predominated slightly over males (51.1% females, 48.9% males).

2. Highest number of males and females were found in the age group of 60-65 years and the lowest number of persons were found in the age group of >80 years in both males and females. The number of females declined sharply after the age of 71 years (36.6% females, 63.4% males).

3. 99.4% of the elderly persons studied were found to be unhealthy. No significant difference between the health status of elderly persons residing in rural and urban areas was found (99.7% rural, 99.2% urban).

4. Out of the 1000 elderly persons studied, 99.4% were found to be unhealthy. There was no significant difference in the health status of males and females when analyzed separately (99.2% males, 99.7% females).

5. The numbers of persons with abnormal ECGs were 50.4% and the remaining 49.6% were normal. There was no difference in abnormality between males and females.

6. The most common type of abnormality detected was in rate (14.4%). T wave abnormality which was the next most common abnormality was seen in 12.3% elderly people. The lowest numbers of abnormalities were found in PR interval (3.0%) and ST segment (2.5%).

7. In elderly persons with abnormal rate (9.4%) were found to have tachycardia and 5% had bradycardia. On analysis of bradycardia in males and females separately, females (5.2%) were found to have higher prevalence than males (4.7%). Similarly on analysis of tachycardia, more males (10.3%) were found to have tachycardia than females (8.7%).

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8. Of all the persons showing bradycardia 54% were females and 46% were males. Of these 82% had rates between 50-59/min. and 18% had it between 40-49/min. No significant difference in the prevalence between males and females was observed.

9. Isolated S. bradycardia was seen in 46% of the elderly persons with bradycardia and 54% of them had bradycardia associated with other ECG abnormalities. Isolated S. bradycardia was more in males (32%) than females (14%). Whereas bradycardia associated with other ECG changes was more in females than male (40% females, 14% males).

10. Elderly persons with bradycardia are more symptomatic than those with normal heart rates. The most common symptom in persons with bradycardia was dizziness (70%) and the least common symptom was syncope (22%).

11. Of all the persons showing tachycardia, 46.8% were females and 53.2% were males. Of these 71.2% had rates between 100-109/min. 16% had it between 110-119/min and 12.8% had rate >120/min. No significant difference in the prevalence between males and females was observed.

12. Isolated S. tachycardia was seen in 45.7% of the elderly persons with bradycardia and 54.3% of them had bradycardia associated with other ECG abnormalities. Isolated S. tachycardia was more in females (25.5%) than males (20.2%). Whereas tachycardia associated with other ECG changes was more in males than females. (33% males, 21.3% females).

13. Elderly persons with tachycardia were equally symptomatic as those with normal heart rates. The most common symptom in persons with tachycardia was dizziness (44.6%) and the least common symptoms was syncope (9.5%).

14. Out of the 1000 elderly persons studied, 5.1% of them were found to have rhythm disturbance. There was no significant difference in the prevalence between males and females (4.8% males 5.5% females).

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15. On analysis of the various types of arrhythmias in 1000 elderly persons it was seen that the most common types of arrhythmia in both males and females were VPCs (1.4% males, 1.8% females). The rest most common was APCs (0.5% males, 0.4% females) other's included J. tachycardia (2 cases) and AF (1 case). PAT, JPCs, V. bigeminy and V. trigeminy were also seen in 1 person each.

16. On analysis of symptoms in persons with irregular rhythm it was seen that breathlessness and dizziness was the most common symptom (45.1%) syncope was least common (7.9%). Equal incidence of symptoms was seen in persons with normal rhythm with breathlessness being the most common (50.5%) and syncope the least common (9.1%).

17. In this study 4.6% of the elderly persons were found to have abnormal P wave. P pulmonate was found in 30% and P mitrale in 0.4% of them. The rest 1.2% was constituted by inverted, variable or absent P wave. Males were found to have a slightly higher prevalence of P wave abnormalities than females. (5.8% males, 3.8% females).

18. 3% of the elderly persons in the study group were found to have PR interval abnormalities of there 2% has prolonged PR interval, 0.6% had short PR interval and remaining 0.4% had variable PR interval. There was no significant difference in the prevalence between males and females (3.6% males and 2.4% females).

19. In this study of 1000 elderly persons, 8% of them were found to have QRS axis deviation. Left axis deviation was almost 2 times more common than right axis deviation (5.7%) left axis deviation, 2.2% right axis deviation. No significant difference in the prevalence between males and females was seen.

20. On analysis of duration of QRS complex it was found that 4.6% of the elderly persons studied had prolonged QRS duration. Males and females, when analyzed separately were found to have almost similar prevalence of prolonged QRS deviation.

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21. ST segment changes analysis showed that 2.5% of the elderly persons studied had ST segment abnormality. Males had almost 2 times more abnormality than females.

22. It was observed on analysis of T wave changes that 12.3% of the elderly persons had these changes with the majority having T wave inversion (11.7%). Males and females when analyzed separately had similar prevalence of T wave changes (12.2% males, 12.2% females).

23. In this study of 1000 elderly persons, it was found on analysis that 20.9% of them had one or more chamber hypertrophy. There was no difference in the prevalence in the prevalence between males and females.

24. It was found on analysis of atrial hypertrophy, that right atrial hypertrophy was 7 times more common than left atrial hypertrophy (2.8% right atrial, 0.4% left atrial). Also males were found to have relatively higher incidence of atrial hypertrophy than females.

25. On analysis of ventricular hypertrophy 15.6% of the elderly persons studied were found to have left ventricular hypertrophy, 1.6% had right ventricular hypertrophy and 0.4% had biventricular hypertrophy. Females were seen to have a slightly higher prevalence of ventricular hypertrophy than males (18.8% females, 16.1% males).

26. Non specific ST segment / T wave changes, on analysis, were found to be prevalent in 6.0% of the elderly persons of the study group. Females were found to have higher prevalence than males (7.1% females, 5.0% males).

27. It was found on analysis that 2.9% of the elderly persons had old and fresh infarcts. On analysis of males and females separately, males were found to have a slightly higher prevalence of infarcts than females (3.7% males, 2.2% females).

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28. On analysis of areas of infarcts in males and females separately it was observed that anterior wall (33.3%) and combination of 2 or more walls infarct (33.3%) was more common in males, whereas the females had more of inferior wall infarction (82%).

29. (a) Out of the 2.9% of the elderly persons with MI, males had a slightly higher prevalence of MI as compared to females (1.8% males and 1.1% females). The prevalence of fresh and old MI was found to be almost same in both males and females with only a slight preponderance of fresh MI over old MI (1.6% fresh MI and 1.3% old MI).

(b) On analysis of symptoms of elderly persons with MI it was seen that breathlessness was the most common symptom in females with fresh MI (43.7%) and males showed an equal prevalence of chest pain and breathlessness (12.5% each). In persons with old MI chest pain and breathlessness showed an equal prevalence in both males and females (15.4% in males and 30.8% in females). Also females were 2 times more symptomatic than males in both fresh and old MI category.

30. On analysis of blocks and conduction defects it was observed that left anterior hemi block (LAHB) was the most common abnormality both among males (52.1%) and females (51.3%) RBBB was the next most common type of abnormality (27.1% males and 25% females. The least common types of abnormalities were 2\textsuperscript{nd} and 3\textsuperscript{rd} degree AV block and LPHB.

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