SPECIFICATIONS FOR CAROTID SINUS MASSAGE

Patients are tested initially in the supine position with the neck slightly extended. Massage is applied over the point of maximal carotid impulse, medial to the sternocleidomastoid muscle at the level of the upper border of the thyroid cartilage. Longitudinal massage is applied for five (5) seconds initially on the right side, and after a one-minute interval this is repeated on the left. Continuous surface electrocardiographic and non-invasive phasic blood pressure measurements (digital photoplethysmography; Finapres, Ohmeda Ltd., Hatfield, U.K.) are made throughout. The procedure is repeated with the patient tilted upright to 70.

Carotid sinus hypersensitivity is diagnosed if massage produces asystole exceeding three (3) seconds (a cardioinhibitory response), a decrease in systolic blood pressure exceeding 50 mmHg (a vasodepressor response), or a combination of the two (a mixed response) [3,5]. Intravenous atropine, 600 ug, is administered to those patients exhibiting greater than 1.5-second asystole to abolish heart rate slowing and allow differentiation of pure cardioinhibitory, vasodepressor, and mixed types.