

Internodal tracts - 2017

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I understood that Bachmann's or "the interatrial tract" is an incorrect denomination and we must abandon this terminology.

This leads me to the reflection that the contingents of fibers in the free wall of right ventricle from right bundle branch with distribution in radial fashion should not also be called fascicular or divisional blocks of the right bundle branch (**Pastore 1983**), fascicular block of the His bundle (**Luna Filho 1989**) but like Bayes de Luna and others calls them "zonal blocks", (**Bayes de Luna 1982; 1987**; focal blocks (**Masini 1952; Rosi 1954**)), parietal blocks, parietal-focal blocks (**Alzamora-Castro 1953**), myocardial peripheral blocks (**de Michelis 2009**) or zonal right end conduction delays (**RECD**) (**Perez-Riera 2012**) of the terminal portion of the right bundle branch in RV free wall.

It usually is thought to be associated with abnormalities of the peripheral Purkinje system (**Liao 1987; Barker 1949**). IRBBB may be a developmental variation in thickness of the RV free wall rather than an abnormality of the RV conduction system in cases without apparent heart disease.

The developmental variant appears to have a genetic basis. (**Moore 1964; 1971**).

If the electrocardiographic pattern of QRS prolongation up to 110 ms (in adults), with a terminal r' in V, and broad S wave in left leads V5 and V6 or standard lead I and aVL, were often the sole consequence of delayed conduction within the right bundle branch, then the term IRBBB to describe this pattern might be appropriate.

Conversely, if delay in conduction in the right bundle branch is only inconsistently present in this electrocardiographic constellation, then the diagnosis of IRBBB would be at best imprecise and often incorrect. (**Massing 1972**)

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