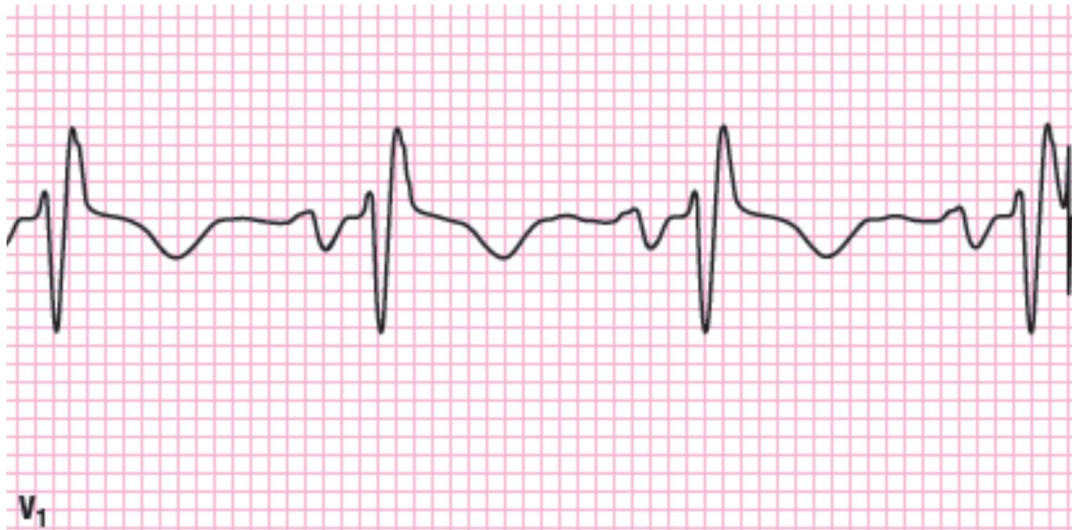


- Left atrial enlargement/abnormality



- Terminal negative portion of sinus P wave in lead V1 ≥ 1 mm deep and ≥ 40 msec in duration (i.e., one small box deep by one small box wide), *or*
- Notched P wave with a duration ≥ 120 msec in leads II, III, or aVF (P mitrale)

Left atrial enlargement by echocardiography can exist with a normal P wave, and P mitrale may be present in the absence of left atrial enlargement.

Prominent atrial repolarization waves (Ta) can mimic Q waves and ST depression by deforming the PR and ST segments, respectively.

Mechanisms responsible for P mitrale include left atrial hypertrophy and/or dilation, intra-atrial conduction delay, increased left atrial volume, and an acute rise in left atrial pressure.

Can be seen in:

- Mitral valve disease
- Heart disease
- Aortic valve disease
- Heart failure
- Myocardial infarction (MI)
- Hypertension/LVH