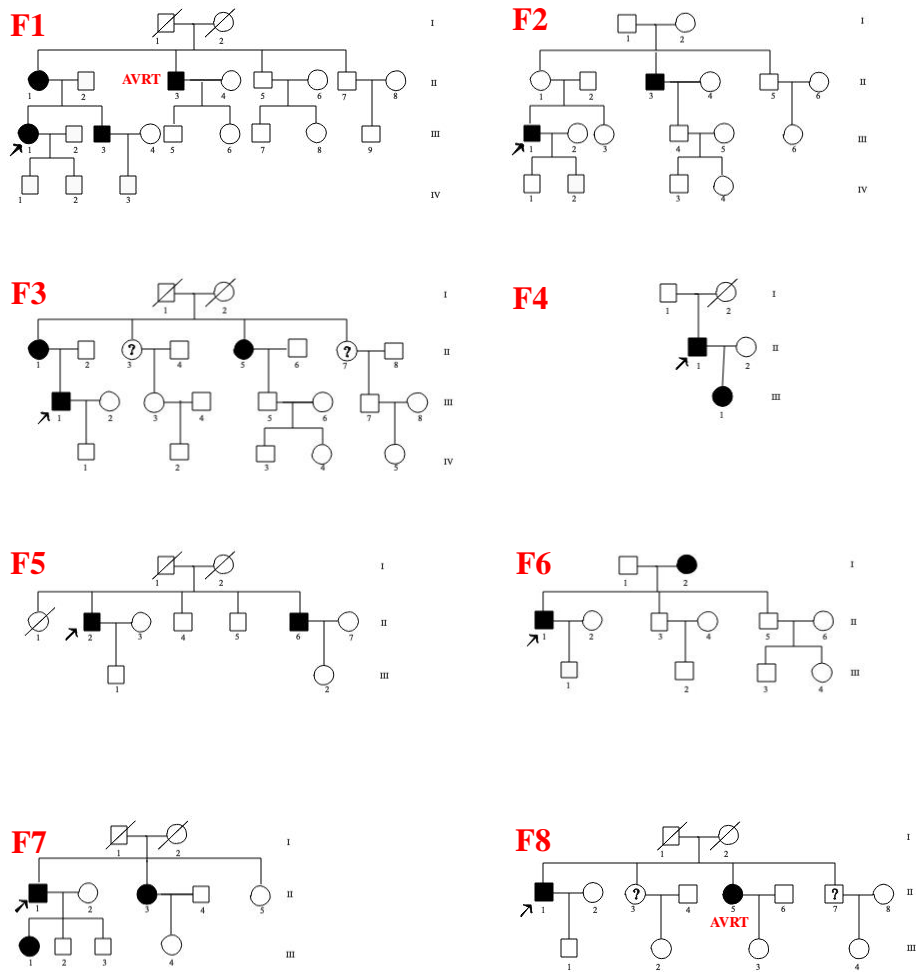


### ***Supplementary material***

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*Chen X, Yan C, Luo R, et al. Clinical report of 8 families with atrioventricular nodal reentrant tachycardia from China. Kardiol Pol. 2021; 79: 185-187.  
doi:10.33963/KP.15739.*

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**Figure S1.** Pedigree trees of the eight families with atrioventricular dual nodal reentrant tachycardia (AVNRT). F1-family one, F2-family two, F3-family three, F4-family four, F5-family five, F6-family six, F7-family seven, F8-family eight. Arrow indicates a proband, squares-men, circles-women, black squares-affected men, black circles-affected women, question mark-suspicious patient. AVRT-atrioventricular reentrant tachycardia.

**Table S1.** Clinical characteristics of the familial AVNRT

Subject	Gender (F/M)	Onset age (Year)	Onset heart rate (bpm)	Cardiovascular complications (N/Y)	Dual AVN (N/Y)	AVNRT types and EPS method
F1 II:1	F	53	150	Y (AF)	Y	Typical (RFCA)
F1 II:3	M	46	165	N	N	AVRT (RFCA)
<b>F1 III:1</b>	F	34	220	N	Y	Typical (RFCA)
F1 III:3	M	36	175	N	Y	Typical (EP)
F2 II:3	M	62	160	N	Y	Typical (RFCA)
<b>F2 III:1</b>	M	34	180	N	Y	Typical (RFCA)
F3 II:1	F	45	174	N	Y	Typical (EP)
F3 II:5	F	50	168	N	Y	Typical (EP)
<b>F3 III:1</b>	M	22	180	Y (PFO)	Y	Typical (RFCA)
<b>F4 II:1</b>	M	30	180	N	Y	Typical (RFCA)
F4 III:1	F	13	160	N	Y	Typical (EP)
F5 I:2	F	50	160	N	Y	Typical (RFCA)
<b>F5 II:1*</b>	M	38	175	N	Y	Typical (RFCA)
<b>F6 II:2</b>	M	55	201	N	Y	Typical (RFCA)
F6 II:6	M	36	174	N	Y	Typical (RFCA)
<b>F7 II:1</b>	M	32	180	N	Y	Typical (RFCA)
F7 II:3	F	46	158	N	Y	Typical (RFCA)
F7 III:1	F	40	166	N	Y	Typical (EP)
<b>F8 II:1#</b>	M	42	208	N	Y	Typical (RFCA)
F8 II:3#	F	45	180	N	N	AVRT (ECG)

F=Female, M=Male, Onset Age=Age (years old) at onset of symptoms of supraventricular tachycardia, bpm=beat per minute, PFO=patent foramen ovale, AF=atrial fibrillation, Dual AVN=dual atrioventricular nodal physiology, AVNRT=atrioventricular nodal reentry tachycardia, AVRT=left lateral atrioventricular accessory pathway, EP=esophageal pacing, EPS=electrophysiological study.

The proband was made thicker in each family

\*suggest AVNRT relapse

# suggest patients suffered syncope