

INTRODUCTION

Dilated cardiomyopathy (DCM) is a chronic heart muscle disease characterised by a dilated and poorly contractile left ventricle (*Braunwald, 1992*).

Patients often present late in end stage heart failure and have a poor prognosis associated with sudden death or progressive heart failure. The identification of patients at increased risk of sudden death or progressive heart failure is problematic and remains a major management goal.

Heart rate variability (HRV) has been shown to be a powerful prognostic indicator after acute myocardial infarction (*Malik and Camm, 1994*) and has recently applied in other clinical settings.

Reduced HRV has been consistently observed in patients with congestive heart failure (*Casolo et al., 1989*) and a relation between changes in HRV and extent of left ventricular dysfunction has controversially reported.