Life-Saving Information for
Pediatricians:

About sudden cardiac arrest and syncope or seizures in the young

- In one study, "on average, children with sudden cardiac arrest had three syncopal episodes or unexplained seizures before SCA. Half did not receive an ECG". From the Annual Meeting of the North American Primary Care Research Group 12/2010
- Most SCD in the young is due to genetic conditions including Long QT Syndrome (LQTS), Hypertrophic Cardiomyopathy, Brugada Syndrome, etc.
- These conditions are frequently misdiagnosed as vasovagal syncope, asthma or epilepsy.

Remember: Syncope is not benign. Fainting usually does have a vasovagal etiology. But "vasovagal syncope" is a diagnosis of exclusion. Everyone deserves at least one ECG

Evaluating syncope in a young person; perform an ECG if patient has:

- Syncope or seizure during or immediately after exercise, emotional excitement or sudden auditory arousal ("alarm clock").
- No abnormal findings on EEG
- Consistent or unusual chest pain and/or shortness of breath during exercise.
- Syncope associated with palpitations or irregularities of the heart
- Family history of recurrent syncope or sudden death (including drowning).

Make a Referral: to an electrophysiologist—and let the family know that parents should have their heart checked as well as all siblings.

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