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ATTENTION: School health professionals

The SADS Foundation is alerting you the possible risk of sudden unexplained death in young people: Death is due to an abnormality of the heart's electrical system or of the heart muscle itself that can cause sudden loss of consciousness, arrhythmia, and sudden death. These children usually appear healthy and, in most cases, the young person and her/his parents have absolutely no idea that something might be wrong. Once diagnosed, these conditions are treatable.

about sudden cardiac death in the young

- Each year in the United States, over 1,000 young people (and 360 infants with SIDS) die suddenly and unexpectedly due to cardiac arrhythmias (that's 4 deaths per day).
- These conditions include Long QT Syndrome (LQTS), Hypertrophic Cardiomyopathy (HCM), Arrhythmogenic Right Ventricular Displasia (ARVD) and others.
- LQTS is 3 times more common than childhood leukemia (ALL) in the US and occurs 1/3 as often as cystic fibrosis and twice as often as PKU.
- 1 in 200,000 high school athletes in the US will die suddenly, most without any prior symptoms—*JAMA 1996; 276*
- According to the CDC, deaths from SCA increased 10 percent (from 2,719 in 1989 to 3,000 in 1996) in people between the ages of 15 and 34.

fast facts about these silent killers:

- Most SCD in children is due to hereditary conditions and, therefore, more than one family member will be at risk. It is extremely important that all family members be tested once one family member is diagnosed.
- The symptoms of genetic arrhythmias (like LQTS) are frequently misdiagnosed as vasovagal syncope, asthma or epilepsy without any cardiac evaluation. Thus, the opportunity to diagnose and treat LQTS and related disorders is missed.
- Most cardiac arrhythmias and structural defects that may cause sudden death in the young are treatable. With treatment, people with these conditions often have normal life spans and lifestyles.

We are asking you to add the Risk Assessment questions (see Is Your Child At Risk? attached) to your school's physical screening forms. If there are any "yes" answers, the student should have a cardiac screening.

We are also asking you to be alert for any symptoms of these conditions (see Who Should be Screened? available from the SADS Foundation) and to educate parents, teachers and coaches about the necessity to screen the child with symptoms.

We are including a teacher packet and a coach packet for your information. If you would like more packets for your teachers and/or coaches—or more Is Your Child At Risk? sheets for parents—please let us know. We are also including a SADS poster and would be happy to send you more posters for all your schools (put in halls, in gyms, teacher's lounges, school office, etc.) We also offer information for families with LQTS. We would love to have you participate in our School Awareness Campaign and/or you may order more materials at <http://sads.org/awareness07.htm>. You can also sign up for our quarterly literature review (<http://sads.org/scientific/main.htm>).

We will be happy to answer any questions you may have—thanks for your help.

P.S. Ask about our new presentations for school nurses or the public!

Supporting Families. Saving Lives