

FOR IMMEDIATE RELEASE

Screening for Cardiovascular Diseases Difficult, but Necessary *Identification of cardiac conditions in athletes may save participant's life*

ROSEMONT, IL - Cardiovascular diseases are difficult to screen for, but the practice of doing so is critical to ensure safe athletic participation. This fact is emphasized by the recent deaths of three individuals in the Detroit Marathon on October 18th, 2009. The new study published in the November/December issue of *Sports Health: A Multidisciplinary Approach* discusses the issues of cardiovascular screening.

The study gives a comprehensive overview of the current guidelines and controversies surrounding cardiovascular screening of athletes. The screening challenges arise, the study notes, from trying to identify very rare and often clinically silent but potentially fatal cardiac diseases in a large number of athletes competing at various levels. "Athletes are two and a half times as likely to experience Sudden Cardiac Death (SCD) than nonathletes," explains study author Sharlene M. Day, MD, Assistant Professor of Cardiovascular Medicine, and Director of the Hypertrophic Cardiomyopathy Program at the University of Michigan. "This statistic should impress upon us the need for cardiovascular disease screening in our athletes. It is important to emphasize to athletes the importance of reporting symptoms that could reflect underlying heart disease."

The study notes that screening of participants with a pre-participation history and physical examination should take place before the start of training. It also recommends that a physician perform the cardiac portion of the exam. If a physician is not available to do the screening, the sports medicine staff should refer any athlete who demonstrates concerning symptoms. "The main objective of the cardiac portion of pre-participation screening is to identify those athletes at risk for SCD triggered by competitive athletics" said Day.

The study emphasizes the need for cardiovascular disease screening to become routine for youth sports since approximately 10 – 12 million youth are involved in athletics at some level. "Unfortunately, the pre-participation history and physical examination lacks sensitivity for predicting the risk for SCD. But it's unclear if adding an ECG will have as significant an impact on rate of SCD in US athletes as it has in Italy. At this stage, we don't have the national resources to deal with mandated ECG administration, interpretation and follow up testing that would be required. It's still a highly controversial area in athlete screening." said Day.

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