

Few doctors follow sudden cardiac death screening guidelines for athletes

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According to a state survey, fewer than 6 percent of doctors fully follow national guidelines for assessing sudden cardiac death risk during high school sports physicals, researchers said at the American Heart Association's Scientific Sessions 2011.

The study was based on responses of 1,113 pediatricians and <u>family</u> <u>doctors</u> and 317 high school athletic directors in Washington state.

Less than half of the doctors and only 6 percent of the athletic directors reported that they were even aware of the guidelines. None of the athletic directors said their schools required physicals to comply with all guidelines.

In sudden cardiac arrest, the heart suddenly and unexpectedly stops beating due to an <u>irregular heart rhythm</u>. Without treatment, death occurs within minutes.

"A <u>young person</u> at the peak of physical prowess, dying without any warning — it's a shocking, tragic and potentially preventable death," said Nicolas Madsen, M.D., M.P.H., lead researcher and pediatric cardiology fellow at Seattle Children's Hospital and the University of Washington School of Medicine.

Recent studies suggest that among the more than 7 million U.S. high school athletes, one out of every 30,000 to 50,000 dies annually from out-of-hospital <u>sudden cardiac arrest</u>.



The American Heart Association published 12-point sudden cardiac death screening guidelines for athletes in 1996 and re-affirmed them in 2007. They consist of eight medical history questions and four physical exam elements, including listening to the heart and checking blood pressure.

Researchers sent 2,190 survey questionnaires by mail and email to pediatricians, family doctors and athletic directors over two months. The unusually high response rate — 56 percent to 75 percent — suggests a compelling interest in the issue, Madsen said.

Physicians were asked questions about pre-sports physicals. Athletic directors were asked about their school's requirements for physicals.

Researchers then used regression analysis and other techniques to determine the level of compliance with national guidelines.

Doctors reported missing several critical questions during screenings:

- 28 percent didn't always ask about chest pain during exercise;
- 22 percent didn't always ask about unexplained fainting;
- 26 percent didn't always ask about a family history of early death:
- 67 percent didn't always ask about a family history of heart disease.

Study results didn't change with the doctor's specialty, level of experience, location or the athletes' school size. Screening frequency and familiarity with the guidelines were linked to greater compliance.

"We need new directions to educate providers and improve policy requirements so patients can actually benefit from these national



recommendations," Madsen said.

The doctors and athletic directors unanimously supported adopting a statewide form incorporating national screening guidelines. Parents should ask doctors and schools if a standardized form is being used, Madsen said.

Provided by American Heart Association

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