

All Children Should Be Screened For Potential Heart-Related Issues



New guidance from the American Academy of Pediatrics calls for all youth should be regularly screened for heart issues that put them at risk for sudden cardiac arrest (SCA). Youth should be screened during well-child checks or preparticipation physical evaluations or at least every three years and especially upon entry to middle, junior and high school.

What Should Be Done To Evaluate a Child's Heart Health

Providers

- Know warning signs & risk factors for SCA
- Conduct thorough personal/family history and physical
- Order genetic testing if there's a family history of SCA or heart conditions
- Use electrocardiogram testing for needed follow up and/or refer to a cardiologist
- Advocate for CPR training and AED placement

Parents

- Know warning signs & risk factors for SCA
- Regularly ask your children if they've experienced them
- Be familiar with your extended family's heart history
- Prepare to answer 4 screening questions
- Report warning signs and heart history (especially changes) to your provider

Given ~50% of youth stricken by SCA reported no symptoms nor family heart history, the AAP policy focus on diagnostic testing only when warning signs or risk factors are present could miss half of youth at risk. For this reason, EP Save A Life advocates for preventative ECGs, which can identify at least two-thirds of conditions that can cause SCA.



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Screening Questions Practitioners Ask At Each Exam

1 Have you ever fainted, passed out or had an unexplained seizure suddenly and without warning, especially during exercise or in response to sudden loud noises such as doorbells, alarm clocks and ringing telephones?

2 Have you ever had exercise-related chest pain or shortness of breath?

3 Has anyone in your immediate family (parents, grandparents, siblings) or other more distant relatives (aunts, uncles, cousins) died of heart problems or had an unexpected sudden death before age 50? This would include unexpected drownings, unexplained car accidents in which the relative was driving or sudden infant death syndrome.

4 Are you related to anyone with hypertrophic cardiomyopathy or hypertrophic obstructive cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome or catecholaminergic polymorphic ventricular tachycardia, or anyone younger than 50 years with a pacemaker or implantable defibrillator?