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Heart problems are a silent killer of children

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Nearly 300 Michiganders younger than 40 die each year of sudden cardiac death, with African-American males dying at 2 1/2 times the rate of others.

The Michigan Department of Community Health, which completed a study last year looking into the deaths, is now turning to parents and schools to help prevent others.

Although sudden cardiac death is not limited to athletes, one of the department's efforts is aimed at high school athletes. Officials say some risks for cardiac arrest can be detected with more thorough screenings of athletes or a deeper examination of genetic history, said Debra Duquette, who directed the review for the health department.

The department is teaming up with the Michigan High School Athletic Association to get the prevention message out. More than half of Michigan's high school students play at least one sport, according to the MHSAA.

Kayla Stanford was just 12 when she collapsed during a track practice in 2006 near her Ypsilanti home.

"I walked out of the hospital -- I didn't know what happened. I just knew that my child was dead," said her mom, Kelly Warren, 40, who is part of a public health video done by the health department.

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Heart trouble killing our kids

The memories remain unmercifully clear for Kelly Warren: Her 12-year-old daughter -- athletic and lean -- limp on an ER table, a cluster of doctors and nurses working to get her heart pumping again.

A voice overhead. *Need a cardiologist. Stat.*

It was too late. At just 12, Kayla Stanford became one of about 290 youths and young adults who die each year in Michigan because their hearts just stop.

To be clear, cardiac arrests in children and young adults are rare, but the numbers are surprising, even to some Michigan public health officials, who began evaluating the cases in 2006, the same year Kayla died.

"Every time a young person dies, it pulls at your heartstrings," said Dr. Greg Holzman, medical executive for the Michigan Department of Community Health. "We ask ... 'Could we have prevented this?'"

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An athlete, clarinet player and straight-A student in Ypsilanti, Kayla was one of 2,336 Michiganders younger than 40 who died of cardiac arrest with little or no warning between 1999 and 2006, according to a review by a panel of public health experts from the state health department, genetics experts, doctors, educators and parents.

The health department is now trying to raise more awareness about the dangers, filming a video for parents, working with the Michigan High School Athletic Association, and setting up an informational Web site.

Warren worked with the state health department on a public awareness video about heart health in the young. By talking about the loss of her daughter, Warren hopes other parents and schools will take steps to make sure their students are healthy for sports and that life-saving automated external defibrillator devices are handy when needed.

"She lived a full life. We need to learn from Kayla's life," she said.

Most of those deaths during the review period were in Wayne County -- 838 in all. Oakland and Macomb recorded 187 and 156 deaths, respectively. Statewide, for every 100,000 Michiganders between 1 and 39 years old, about 5.5 of them will die suddenly because of a heart problem.

And that's the average over wide disparities. Males and African Americans, by far, are at greater risk. The rate for African-American males was 15.8 per 100,000 -- nearly 2 1/2 times the average.

"We were not expecting that many in any way, shape or form," said Debra Duquette, genomics coordinator at the state health department and program manager for the review of the Sudden Cardiac Death in the Young (SCDY) cases.

But even more surprising to folks like Duquette, whose specialty is genetics, was something else.

The cause of the heart problems in victims 1 to 29 years old was most often related to a genetic glitch that causes a thickening of the heart muscle or problems with electrical rhythms. But the most common underlying cause for the oldest victims -- those 30 to 39 -- was atherosclerotic cardiovascular disease -- a condition that may be brought on by genetics and is marked by clogged arteries, overloaded hearts and a lack of exercise.

In other words, the poor health choices that are expected to be lethal as people gray might actually be a threat much earlier, especially if genetically predisposed.

Atherosclerosis is "what kills you when you're 80, not when you're young," Duquette said.

The Michigan report is another warning bell over things like childhood obesity, said Mayo Clinic's Dr. Michael Ackerman, a specialist in SCDY.

"Atherosclerotic cardiovascular disease is not a disease of the elderly any longer. These are deaths that are not waiting for retirement to happen," he said.

How to save lives?

Michigan's task force now is pushing for better screening in young athletes, too, and even

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suggesting that molecular autopsies of the dead might alert family members of genetics defects they share.

"We're talking about something that might be preventable. With greater awareness, we'd be able to detect these conditions," Duquette said.

But mandating such a test could be tricky because it brings about questions of finances and fairness, for example.

With this type of death being so rare, should there be such a burden on so many parents, schools and doctors for so few? And should a football player be screened, but not the chess club member? Who pays for it? Would false positives keep athletes off the field, even temporarily?

So the group has stopped short of mandating electrocardiograms (EKGs) and other tests.

Dr. David Haines, chairman of cardiovascular medicine at Beaumont Hospitals and others at Beaumont offer periodic free screenings, but only because a team of doctors has volunteered their services. Otherwise, the exams could cost hundreds of dollars and be cost-prohibitive for some parents, he said.

Society, he said, "must ask ourselves how much are we willing to spend to save the life of a teenage athlete?"

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