

HOW CAN I PREVENT SCD IN THE YOUNG?

- Learn to recognize the **"The Warning Signs"** for a potential heart condition.
- Keep a record, with the date and time, of any episodes of fainting or seizures. It is very important to indicate the activity or circumstances leading up to the event.
- Recommend that this individual be referred to a cardiologist for a complete cardiac assessment. This assessment should include an analysis of the heart rhythm and, where indicated, cardiac imaging and exercise testing.
- Consider limiting participation in physical activity until a medical assessment is completed.
- Promote CPR training in your community and lobby for the installation of Automated External Defibrillators (AEDs) in all schools, public sports facilities and other public places where people congregate eg: Community Centres, Malls, Churches, government buildings etc.

HOW CAN I HELP A STUDENT WHO HAS BEEN DIAGNOSED?

DO inform your staff. Are staff trained to perform CPR and to use an AED (Automated External Defibrillator)? Review emergency procedures in your facility.

DO NOT panic. Most children cope very well with these conditions and are well aware of their own limitations.

DO establish communication with the parent/guardian to ensure that you know how to react appropriately to an emergency situation: eg. How do I quickly reach the parent/guardian?

DO record all pertinent information in the student's file for the purposes of consistent follow-up by other teachers or coaches.



MISSION STATEMENT

To save the lives and support the families of children and young adults who are genetically predisposed to sudden death due to heart rhythm abnormalities.



Supporting Families.
Saving Lives.



For more information:
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AN
INFORMATION
PAMPHLET
FOR EDUCATORS & COACHES

WHAT ARE **SADS** CONDITIONS?

SADS stands for **Sudden Arrhythmia Death Syndromes**

SADS represents a variety of cardiac disorders that can sometimes be responsible for Sudden Death.

SADS conditions were largely misunderstood and/or misdiagnosed until the mid-1990's.

CONSIDER THE FOLLOWING... **HEADLINES:**

- *"...11 year old girl died suddenly after walking into her morning classroom"*
- *"High school hockey player collapses, dies during game"*
- *"No clear explanation found in the death of teenager"*

In each of these cases, an apparently healthy young child or teen has died during a game or during participation in normal school activities. It's a tragedy. It makes headlines. Every teacher or coach who reads these headlines shudders, feels sympathy for the family, and regrets the lost potential.

It is estimated that as many as 50% of young people who experienced Sudden Cardiac Death (SCD) had symptoms (refer to **"The Warning Signs"**) prior to their event. These symptoms may have been misdiagnosed or dismissed as insignificant.

THE WARNING SIGNS

Fainting (syncope) or seizure during physical activity.

Fainting (syncope) or seizure resulting from emotional excitement, emotional distress, or startle.

Family history of unexpected sudden death during physical activity or during a seizure, or any other unexplained sudden death of an otherwise healthy young person.

These symptoms are not conclusive in and by themselves but the presentation of any one symptom requires an immediate cardiac evaluation.

Anyone with these symptoms should see their family doctor and ask to be referred to a cardiologist or an electrophysiologist for a complete cardiac assessment. This assessment should include an analysis of the heart rhythm and, where indicated, cardiac imaging and exercise testing.

IMPORTANT FACTS

Recognition of **"The Warning Signs"** and early medical intervention are the keys to preventing sudden cardiac death in children and young adults.

Many cardiac arrhythmia disorders are genetic.

With proper medical assessment, many of these disorders are identifiable and treatable.

