

SUDDEN CARDIAC DEATH

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Sudden Cardiac Death is defined as “natural death due to cardiac causes, manifesting as an abrupt loss of consciousness and eventual death within one hour of the onset of symptoms, occurring in an otherwise healthy person without previously known heart disease.”

Sudden Cardiac Death is usually rapid, unexpected and tragic. In the United States, it takes the lives of approximately 300,000 people each year, accounting for almost 50% of all cardiac-related deaths.

THE CAUSES

There are three main conditions which contribute to Sudden Cardiac Death. They include coronary artery disease, thickened and/or weak heart muscle and electrical disorders of the heart.

Coronary Artery Disease

Eighty percent of people who die from Sudden Cardiac Death have underlying coronary artery disease – blocked coronary arteries which restrict the flow of blood to the heart muscle. Undetected coronary artery disease as the result of birth abnormalities, or a buildup of fatty deposit is on arterial walls, can result in this phenomenon.

Heart Muscle Disorders

Thickening of the heart muscle caused by high blood pressure, abnormal functioning of heart valves or hereditary conditions – as well as enlarged weak hearts due to acute heart attacks or other causes – may precipitate electrical instability and unstable heart rhythms ending in cardiac arrest

Electrical Disorders

While most lethal cardiac rhythms are related to abnormalities that can be detected in the heart itself, a variety of dangerous heart rhythm disorders occur in otherwise normal individuals. If not identified and treated accordingly, Sudden Cardiac Death may occur.

SUDDEN INFANT DEATH SYNDROME

The Sudden Infant Death Syndrome, occurring between birth and six months of age, is thought to be a form of abrupt death arising as a consequence of lethal cardiac rhythms. Scientists also believe that breathing difficulties in such infants may precipitate these abnormal heart rhythms.

SUDDEN DEATH IN ATHLETES

Cardiac arrest after extreme physical activity in otherwise well-conditioned athletes occurs infrequently. When it does occur, it is surrounded by significant tragedy and attention, because for most of us, well-conditioned athletes epitomize good health.

While most of these athletes have previously unrecognized abnormalities of the heart – including thickened heart muscles, blocked arteries or valve abnormalities – a small number show no sign of abnormalities at autopsy.

WHO'S AT RISK?

Patients at risk for Sudden Cardiac Death often have no symptoms. However, there may be early warning signs such as chest pain, shortness of breath, skipped and irregular heartbeats, intermittent dizziness and a variety of other complaints.