

From the Chief Medical Officer
Dr Michael McBride



Department of
**Health, Social Services
and Public Safety**

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HSS(MD)2/2009

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

To: All General Practitioners
Medical Directors HSC Trusts (*for onward
dissemination to Consultants in Cardiology,
Paediatrics and General Medicine and Genetics*)
Directors of Public Health HSS Boards
Jill Fitzgerald, Department of Education

Castle Buildings
Stormont Estate
Belfast BT4 3SQ
Tel: 028 9052 0563
Fax: 028 9052 0574
Email: michael.mcbride@dhsspsni.gov.uk

Your Ref:
Our Ref: HSS(MD)2/2009
Date: 2 February 2009

Dear Colleague

SCREENING FOR SUDDEN CARDIAC DEATH

I am writing to inform you that the UK National Screening Committee (NSC) has reviewed its policy advice on population screening for Hypertrophic Cardiomyopathy, which is one of the main causes of sudden cardiac death in the UK. They have advised that screening should not be offered.

Sudden Cardiac Death

Sudden cardiac death is not caused by a single condition. In particular, there are many different causes of sudden cardiac death in young people and these include the cardiomyopathies, channelopathies (including long QT syndrome, Brugada syndrome, and catecholaminergic polymorphic ventricular tachycardia), myocarditis, congenital artery anomalies and coronary artery disease.

There is no one specific test which can identify all those at risk of the different causes of sudden cardiac death. Also studies have found no consistent link between physical exertion and sudden cardiac death.

Should a young person decide that they want to be screened it is important that they are fully informed about the advantages and limitations of screening.

