

GARLAND ISD

Teens part of heart study

Tests are offered in hopes of detecting problems early

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Justin Turner didn't know much about EKGs. But the 17-year-old football player at Garland High School had heard about other student athletes collapsing or dying from heart conditions.

"I can picture somebody doing a sport and in the middle of the game ... they fall out with cardiac arrest," said Justin.

So when he was one of a few hundred students randomly selected to get a free heart screening, he jumped at the opportunity.

Garland ISD is the only Dallas-area school district participating in a state study to see whether EKGs — or electrocardiograms — and echocardiograms should be mandatory for students in Texas.

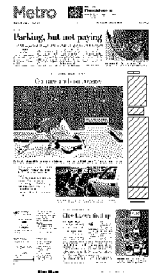
The Legislature allocated \$1 million for the statewide study in 2007. A major section of the new law requires automated external defibrillators to be on school campuses during athletic events and practices.

Lawmakers decided to go a step further with the study,

which could shed light on how many students might have undiagnosed heart problems.

Children's Medical Center Dallas was chosen to conduct the study, along with research-

See **TEENS** Page 3B



ers in Austin and Houston. Children's chose Garland ISD students to participate.

Dr. Ilana Zeltser, a pediatric cardiologist at Children's Medical Center, said Garland ISD is a good district to study because of its ethnic diversity.

"We're trying mostly to target high schools, but actually the age range is 12 to 18," Dr. Zeltser said. "The disease really manifests itself in adolescence."

EKGs trace the electrical activity of the heart. Echocardiograms, which use sound waves to create a picture of the heart, are often recommended after abnormal EKG results.

Of the 237 students tested in Garland, more than a dozen have or will receive notices encouraging them to follow up with a doctor.

Garland ISD Superintendent Curtis Culwell said there have been no sudden cardiac deaths in Garland's school sports during his 10 years as superintendent. But he said the screening makes sense, especially because the state has devoted millions of dollars for student steroid testing with just a handful of positive results so far.

In July, the University Interscholastic League announced that during the 2007-08 school year, only two students' tests were positive for steroids, and four needed further investigation. More than 10,100 students were tested statewide, representing a small sample of the 750,000 high school athletes. Officials have said the program is more about deterrence than catching users.

Dr. Culwell said he recognizes the dangers of steroids but believes cardiac screening

is also important.

"It could save lives," he said. "I'd like to see the state help make it available to every student athlete" if economically feasible.

The cost of an EKG in private practice varies but can range from \$35 to \$300 without insurance. The more precise echocardiogram can cost about \$1,000.

Maggie Willis, Garland ISD's director of health services, said state government would have to subsidize a wide-ranging screening program.

"A lot of our students don't have insurance and couldn't afford this," she said.

Jeff Kloster, the Texas Education Agency's associate commissioner for health and safety, said testing large numbers of students could drive down costs — possibly down to \$35 for an EKG and echocardiogram combined. "If you know you've got 40 kids and you've got a cardiologist on point and a technician on shift, it's possible," he said.

"Is this something that folks are willing to get involved in? That would be part of the discussion," Mr. Kloster said.

Justin Turner's mother, Jackie Davis, said cardiovascular screening might catch problems that a primary doctor wouldn't detect during a regular physical.

"I thought it was important to help this study and determine how many kids were actually at risk," Ms. Davis said.

Mr. Kloster is working on an interim report to the Legislature. Students in other parts of the state will be tested before final reports are finished this summer.

"We are going to be contact-

ing school districts and are hoping to set up more venues after Christmas break,” said Jayni George, a research coordinator at Children’s Medical Center Dallas. “We’re hoping to have two to three more school districts. We’re looking for diverse schools.”

Justin, whose test results turned out normal, said he feels lucky to have been chosen.

“It feels good that I can put myself out there and try to help prevent something,” he said.

Q&A **Checking for heart problems**

What is an EKG?

Electrocardiograms, or EKGs, trace the electrical activity of the heart. Echocardiograms are often used after abnormal EKGs and use ultrasound to create a picture of the heart.

What can they detect?

Cardiovascular screening can detect hypertrophic cardiomyopathy (HCM), a genetic condition that is a common cause of sudden cardiac death. HCM causes

excessive thickening of the heart muscle.

How common is sudden cardiac death?

Sudden cardiac death in the young (people under 35) is much less common than in adults, occurring in only 0.5 to one person per 100,000 in the United States, according to the American Heart Association.

SOURCES: UT Southwestern Medical Center at Dallas and Children’s Medical Center; American Heart Association