

Strategic Approaches to Minimize Sudden Cardiac Death in Our Society

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Sudden cardiac death (SCD) remains a major global public health problem. Current estimates of annual burden in the USA exceed 300,000, with a possible global incidence in the range of 4-5 million. In fact, the years of potential life lost from SCD in the USA are greater than the mortality from any individual cancer in both men and women. Particularly due to the dynamic and unexpected nature of this condition, there are some unique challenges we need to confront in order to minimize societal burden of SCD. In this plenary session talk I will highlight these challenges, and the growing opportunities we may have to solve them. The development of a systematic and efficient emergency medical response is an urgent and critical step, and participation of the broader community in this process is likely to greatly enhance this response. While the surgical implanted internal defibrillator is currently the mainstay of SCD prevention, the selection of the best candidates needs to be optimized. With a view to discovery of novel factors for SCD risk prediction, the Oregon Sudden Unexpected Death Study was established in 2002, and is an ongoing prospective community-based case-control study among a population of the approximately 1 million residents of Portland, Oregon, USA metropolitan area. I will share findings from this study that have contributed to the understanding of several aspects of SCD epidemiology, clinical risk prediction, and the development of a new paradigm for prevention. In the meantime, as clinicians we should recognize that our efforts to prevent and treat conditions such as hypertension, diabetes, obesity, heart failure and coronary artery disease will also make a significant contribution to prevention of SCD.