

# MyCardioAdvocate™

## Killer Workouts

*When fitness alone isn't enough*

*No 2026 guideline changes*

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## Why This Matters

The irony of sudden cardiac death in athletes is brutal: the fittest among us sometimes die from underlying cardiovascular disease. Exercise is cardioprotective—it reduces CV risk, improves outcomes, and extends life. Yet exercise can also *unmask* or *precipitate* cardiac events in those with hidden structural or electrical disease. Arrhythmogenic right ventricular cardiomyopathy (ARVC), hypertrophic cardiomyopathy (HCM), long QT syndrome, and other conditions can lurk undetected in seemingly healthy athletes. The cruel twist: **athletes receive the least cardiovascular screening** because they appear healthy. This brief is a wake-up call.

## Why Athlete Screening Flies Under the Radar

- **Health bias:** Fitness is equated with health. Fit athletes seem healthy, so screening is deferred.
- **Screening gaps:** Many athletes never receive baseline EKG, echo, or family history assessment.
- **ARVC/HCM missed:** Arrhythmogenic right ventricular cardiomyopathy and hypertrophic cardiomyopathy can be silent until exercise triggers arrhythmias.
- **Family history ignored:** Sudden cardiac death in a family member is a red flag that is often minimized.
- **Syncope dismissed:** Fainting during exercise is sometimes attributed to dehydration or exertion; cardiac causes are missed.

## MyCardioAdvocate™ Checklist: The Adult Athlete

### 1. Get a Preparticipation Cardiovascular Screen

Before engaging in competitive or high-intensity exercise, undergo baseline screening: detailed personal and family history, physical exam, and 12-lead EKG. Echo may be indicated if any abnormalities are found.

### 2. Know Your Family History

Ask: Has anyone in my family died suddenly or had unexplained syncope, especially young relatives? Document this. Sudden cardiac death runs in families, sometimes unrecognized as cardiac.

### 3. Report Chest Discomfort, Dyspnea, or Syncope

If you experience chest pain, shortness of breath, lightheadedness, or fainting during or after exercise, seek immediate cardiac evaluation. Do not assume it's dehydration or overtraining.

### 4. Discuss Your Sport with Your Cardiologist

If you are a competitive athlete or regularly engage in high-intensity exercise, discuss your specific sport and intensity with your cardiologist. Some activities carry different risks for specific conditions.

## Key Takeaways

- Fitness is cardioprotective but does not guarantee the absence of structural or electrical heart disease.
- Exercise can unmask or precipitate events in those with ARVC, HCM, long QT, or other hidden conditions.
- Athletes receive the least CV screening despite being at risk for sudden cardiac death from hidden disease.
- Preparticipation screening (history, EKG, echo if indicated) can identify high-risk conditions before they are fatal.

## Next Steps & Related Content

- Schedule a preparticipation cardiovascular evaluation before engaging in competitive or high-intensity exercise.
- Document your family history, particularly any sudden cardiac deaths or unexplained syncope.
- Discuss your training regimen and sport-specific risks with your cardiologist.
- Review related briefs: **ARVC & Sudden Cardiac Death, Hypertrophic Cardiomyopathy, Long QT Syndrome.**

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*Disclaimer: This brief is educational and does not replace professional medical advice. Always consult your healthcare provider before starting a new exercise program, and seek immediate medical attention if you experience chest pain, dyspnea, or syncope during exercise.*