ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #535

   b. Abbreviated Title: SUDDEN DEATH

2. Writing Group (list individual with lead responsibility first):
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3. Timeline:

   Analysis to begin December 1997. First draft to be prepared by April 1998.

4. Rationale:

   Sudden cardiac death is an important component of total CHD mortality. The Framingham Heart Study has shown that approximately 20% of men present with their initial symptoms of coronary artery disease as sudden death. Since sudden death carries such a poor prognosis (few are resuscitated), a shift in its proportion could cause considerable variance of CHD mortality. Unfortunately, many community surveillance studies do not acquire sufficient information from out of hospital coronary deaths to determine the time from symptom onset. Therefore, the distribution of trends in sudden cardiac death across race and gender groups is not well documented. This paper will utilize ARIC surveillance to document recent trends in sudden cardiac death.

5. Main Hypothesis:

   (1) The proportion of CHD mortality that is sudden cardiac death declined from 1987 to 1995.
   (2) The rate of sudden cardiac death declined from 1987 to 1995.
   (3) Differences in rates of decline of sudden cardiac death exist among race and gender groups and geographic locations.

6. Data (variables, time window, source, inclusions/exclusions):

   ARIC community surveillance data will be used for these analyses. A definition of sudden death will be developed for this manuscript. 1987-1995 surveillance data available February, 1998.