## Eluned Morgan AS/MS Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services

Llywodraeth Cymru Welsh Government

Eich cyf/Your ref P-06-1197 Ein cyf/Our ref EM/14177/21

Jack Sargeant MS
Chair - Petitions committee

20 December 2021

Dear Jack.

Thank you for your letter of 19 November about the Petition P-06-1197 about the introduction of a heart screening programme for all 11 to 35-year-olds in Wales who represent their school or county in sport. I noted the petitioner's further comments on this issue.

As I said in my previous response, population screening programmes are recommended by the UK National Screening Committee (UK NSC) on the basis of evidence that they can save lives through early risk identification. However, this is balanced against their potential to do harm by identifying risk factors that would never otherwise develop into a serious condition or complication, leading to unwarranted health anxiety or exclusion from physical exercise. Screening programmes may have false negative results, so do not guarantee protection.

Receiving a low-risk result does not prevent the person from developing the condition at a later date. Population screening programmes should only be offered where there is robust, high-quality evidence that screening will do more good than harm.

Screening to prevent Sudden Cardiac Death (SCD) in 12 to 39-year-olds has been considered by the UK NSC and for these reasons is not recommended and, therefore, cardiac screening is not provided in the UK.

It is also important to note not all organisations support universal cardiac screening, as misleading screening results can have potentially damaging consequences for healthy athletes and their families such as overtreatment and misdiagnosis which can follow athletes throughout their lives.

Although whole-population screening is not shown to be beneficial, families of individuals with SCD should be offered individual clinical assessments to assess their risk. This is

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

'cascade' case-finding in a higher-risk population rather than whole-population asymptomatic screening. Additionally, young people who have symptoms or concerns, particularly if they are very physically active, should speak to their GP who will be able to advise them as appropriate.

There is an option offered by the Medical Research Council (MRC) for the funding of longitudinal cohort studies – where the applying academics will need to make the case. The MRC would need to be contacted directly for more information.

https://mrc.ukri.org/about/our-structure/strategy-board-overview-groups/population-health-sciences-group/longitudinal-population-studies-strategic-advisory-panel/

Yours sincerely,

**Eluned Morgan AS/MS** 

M. E. Myan

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