## The USAT Experience TRIATHLON FATALITIES

LAWRENCE L. CRESWELL, MD



#### Lawrence L. Creswell, MD

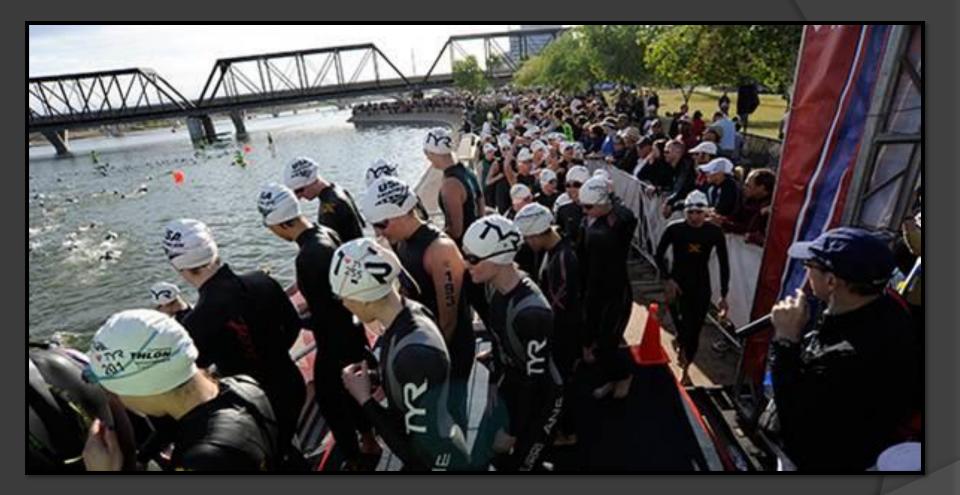
- Heart Surgeon, University of Mississippi
- Triathlete
- USAT Medical Review Panel











Image, MarioCantu/CIMAGES. USAT Multisport Zone, Oct., 2014.

#### **Race-Related Medical Problems**



- Injuries
- Minor medical problems
- Serious medical
  - problems
  - Fatalities

#### Media Attention

#### Ross Ehlinger Identified as Alcatraz Triathlete Who Died During Race

By Erin Sherbert



Ross Ehlinger of Austin, Texas died during Escape From Alcatraz triathlon

S.F. EXAMINER FILE PHOTO

The San Francisco Medical Examiner's Office this morning said it was 46-year-old Ross Ehlinger who died on Sunday during the city's popular Escape From Alcatraz triathlon, marking the first death in the history of the annual event.

SF Weekly reports that the Austin resident died less than a minute after he jumped into the chilly water; he was pulled from the Bay immediately and paramedics performed CPR, but were unable to revive him.

San Francisco Examiner Escape From Alcatraz Triathlon, March 3, 2013

#### Media Attention



#### **Trouble Beneath The Surface**

Once the quirky domain of super athletes, triathlons have hit the mainstream and brought along an increasing number of deaths. What's happening? There are no simple answers.

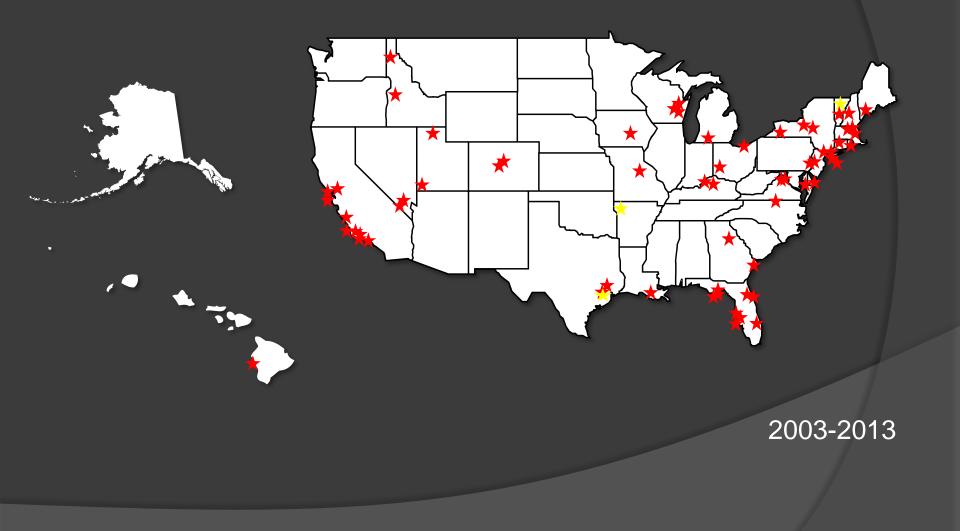
Outside the Lines

by Bonnie D. Ford

10/18/13

ESPN, October 18, 2013 Outside the Lines, T.J. Quinn and Bonnie Ford

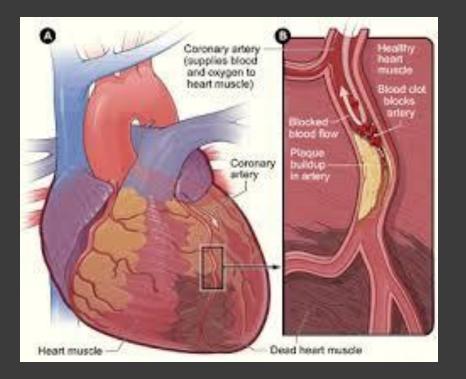
#### **Fatality Locations**

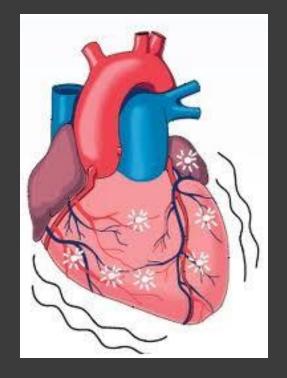


#### Audience Poll

- Have/do you....
  - Been at a race with a fatality?
  - Know an athlete who died at a race?
  - Raced at venue with previous fatality?
  - Been involved organizationally with a fatality?

# Background: Sudden Cardiac Death (SCD)





**Heart Attack** 

Cardiac Arrest→ Sudden Cardiac Death (SCD)

## SCD in Running Races

Marathon, Half-Marathon 2000-2010 10.9 million runners

- 59 victims of SCA
- Marathon: ~1 per 100,000
- Half-Marathon: ~1 per 300,000
- Male >> Female
- Survival rate: 29%
  - Better if recent MD visit
- Autopsy: Abnormal heart in majority
- Deaths in final miles



Theory: Surge at finish, mismatched blood/oxygen supply/demand

Kim JH et al. NEJM 2012;366:130-140.

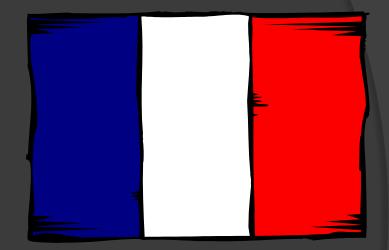
## SCD in College Athletes

- 2004-2008
- 1,969,663 athlete participationyears
- SCD in 1 per 43,770 athletes per year
  - Basketball
    1 per 11,394
  - Swimming 1 per 21,293
  - Lacrosse 1 per 23,357
  - Football
    1 per 38,497
  - Cross-country 1 per 41,695



# Sports-Related SCD in General Population

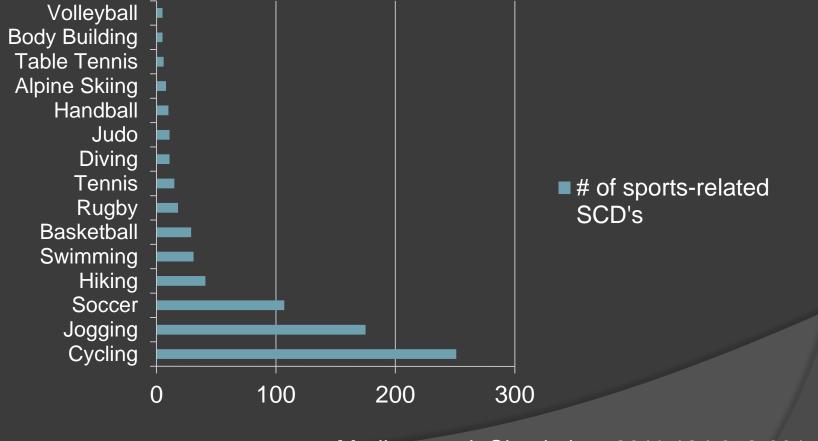
- 2005-2010
- Overall, 4.6 cases of SCD per million per year
  - Age range: 11 to 75 years (average, 46 years)
  - 6% in young, competitive athletes
  - >90% in context of recreational sports



Marijon, et al. Circulation, 2011;124:672-681.

## Sports-Related SCD in General Population

# of sports-related SCD's



Marijon, et al. Circulation, 2011;124:672-681.

# Sports-Related SCD in General Population

- Implications for USA
  - Rate of SCD is probably underestimated
    - No organized reporting mechanism
  - ~4250 cases per year in USA
  - ~1700 cases per year in Japan



#### **Triathlon Fatalities**

- What do we know?
- How do we know it?
  - Media accounts
  - Brief scientific report, 2010
  - USA Triathlon (USAT) review, 2012
    - Fatality Incidents Study

### A Scientific Report

#### A Scientific Report: Focus on SCD

- Kevin M. Harris, MD
  - Minneapolis Heart Institute
- ACC Meeting, 2009
- Research Letter, JAMA, 2010  $\bigcirc$



#### **RESEARCH LETTER**

#### Sudden Death During the Triathlon

To the Editor: Triathlon is among the most vigorous amateur athletic disciplines, requiring expertise in swimming, biking, and running.<sup>1-3</sup> Although sudden death risk has been

(Reprinted) JAMA, April 7, 2010–Vol 303, No. 13 1255



AP Medical Writer / March 28, 2009

22 Email | 🖶 Print | 🖺 Single Page | |

Text size

ORLANDO, Fla.-Warning to weekend warriors: Swim-bike-run triathlons pose at least twice the risk of sudden death as marathons do, the first study of these competitions has found.

The risk is mostly from heart problems during the swimming part. And while that risk is low -- about 15 out of a million participants -- it's not inconsequential, the study's author says.

### SCD in Triathlon: Harris et al.

- JAMA Letter, April, 2010
  - 2006-2008
  - 959,214 participants
  - Triathlon
  - 14 deaths
    - 13 swim, 1 bike
    - 11 men, 3 women
    - 6 sprint, 4 intermediate, 4 long-distance
  - SCD rate = 1.5 per 100,000 participants
     Comparison: Marathon, 0.8 per 100,000 runners

### SCD in Triathlon: Harris et al.

- Autopsy information
  - 14 deaths
  - 9 autopsy reports from swimming victims
    - All "accidental drowning" as cause of death
    - 2 normal hearts
    - 7 abnormal hearts
      - 5 with abnormal hypertrophy
      - 1 with WPW syndrome
      - 1 with coronary artery anomaly

#### SCD in Triathlon: Harris et al.

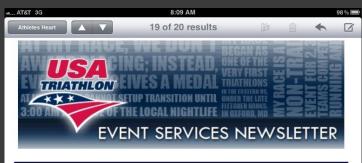
#### Conclusions

 "Although mass screening before competition may be impractical, awareness of cardiovascular risks may motivate athletes to seek preparticipation evaluations on an individual basis."

 "Efforts to improve triathlon safety could include establishing minimum achievement standards for participation, including swimming proficiency."

#### **USAT Review**

#### **USAT Review**



A Message From CEO Rob Urbach



Dear Race Director.

In the tragic wake of the fatalities which have hit our sport this year - most recently at New York City - we want to reassure you that USA Triathlon continues to closely monitor these incidents, gather accurate information to identify all options and to take the appropriate next steps. A key component of this process will be to provide education to the public as necessary. It should be noted that, based on the information we have received following each incident, we believe the race director and their staff have acted in accordance with applicable USA Triathlon rules, regulations and safety measures. All of these race directors are receiving our full support throughout this difficult process.

As the National Governing Body for multisport in the United States, it is incumbent upon us to further examine this issue. Accordingly, we will commission a task force of professionals to specifically study triathlon fatalities in past years, assess the existence of any potential causes or links, and deliver recommendations based on its findings. This action is being taken in the best interests of our athletes and members, as well as our community of certified race directors. We will be sure to provide you with updates regarding the activities of this task force as soon as they become available.

In the meantime, please feel free to reach out to me or Event Services Director, Kathy Matejka, (<u>kathy.matejka@usatriathlon.org</u> or <u>719-955-2813</u>) if you have any questions or concerns.

 USA Triathlon announces Medical Review Panel
 August 2014

August, 2011

Sincerely,

### **USAT Medical Review Panel**



Bill Burnett



Stuart Weiss, MD



Richard Miller, MD





#### Robert Vigorito

Larry Creswell, MD

### USAT Review

Medical Review Panel			
Late 2011	Input from Triathlon		$\sum$
Reviewed 2003- 2011	2012	Recommendations	
	RD Symposium	Final Report:	
	Review Group	Fatality Incidents Study	
		Shared Responsibility for Race Safety	
		Nace Salely	

### **USAT Fatality Incidents Study**



#### www.usatriathlon.org

USA Triathlon views the safety of our members as a core imperative. Event-related fatalities have captured the attention of our community, raising safety concerns among athletes, family members and other supporters, event organizers, sponsors, community leaders, and the medical community. We have conducted a careful review of the collective experience with fatalities at USA Triathlon-sanctioned events from 2003 through 2011. Our objectives were to attempt to bring clarity, identify potential patterns and underlying causes, and investigate opportunities to make any future improvements in event safety.

Click here to view a PDF file of the USA Triathlon Fatality Incidents Study.

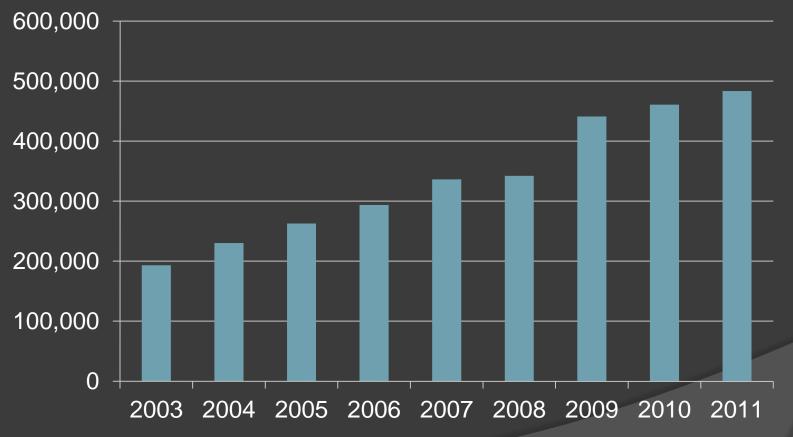
## **USAT Review**

- Information Reviewed
- Athletes
  - Age
  - Gender
  - Event, date, format, length
  - Brief narrative
- USAT membership, participation
- Sanction requirements
- Press accounts

- Information Not Reviewed
- Athletes
  - Medical history
  - Treatments
  - Autopsy
  - Experience, ability
- Events
  - Safety plan
  - Water temp
  - Water conditions

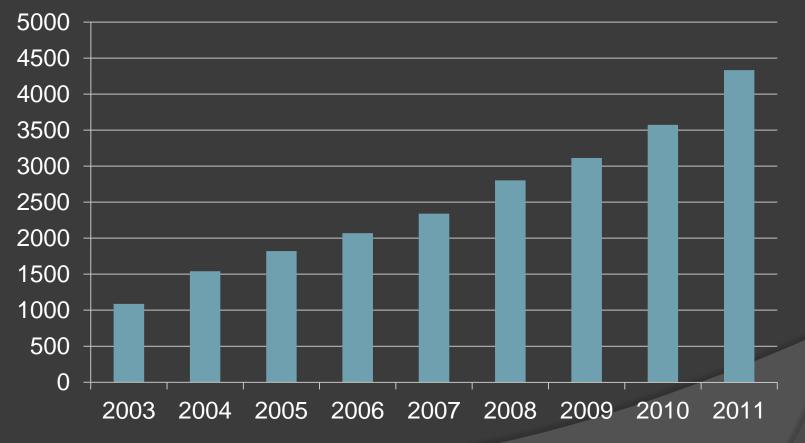
## USAT Review: Increasing Participation

**USAT Member Counts (Annual plus 1-Day)** 



# USAT Review: Increasing Participation

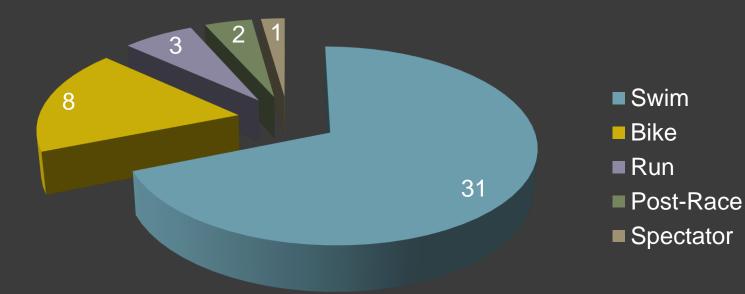
**USAT-Sanctioned Events** 



Year	Number of Fatalities	Type of Fatalities
2003	1	<u>AP</u>
2004	2	96 96
2005	7	SenSenSen 45 🛉 🗰
2006	3	
2007	6	ulen ulen ulen ulen 👖
2008	8	ulen ulen ulen ulen ulen ulen de
2009	3	- Sen 40
2010	3	- Sen 40
2011	12	$\dots$
Total	45	

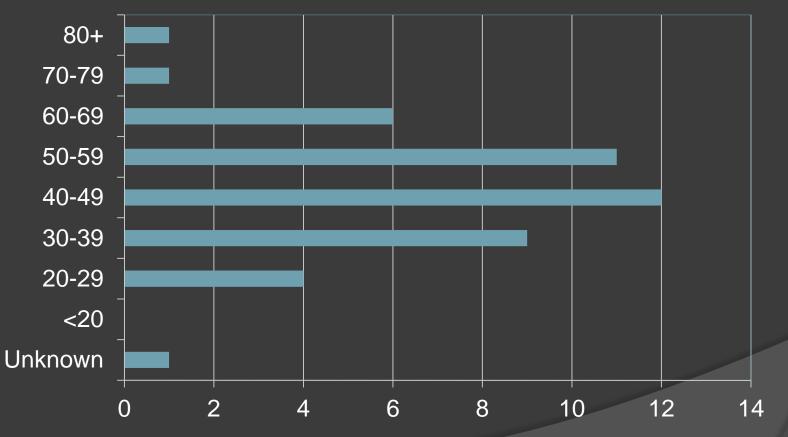
#### Fatalities by Discipline

#### Discipline



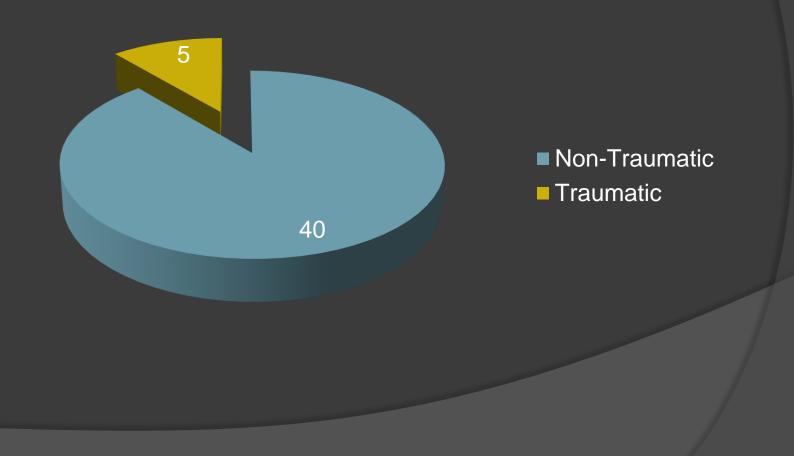
#### Fatalities by Athlete Age

Age (Years)



### Fatalities by Type

**Type of Fatality** 



#### Overall Race-Related Fatality Rates

Year	Approximate Fatality Rate
2003	N/A*
2004	N/A*
2005	N/A*
2006	1 per 92,000
2007	1 per 57,000
2008	1 per 45,000
2009	1 per 159,000
2010	1 per 173,000
2011	1 per 54,000
Average 2006-2011	1 per 76,000

### USAT Review: Key Findings

- Relationship to race length, venue, swim design
  - Fatality rate not related to race length
  - Fatality rate not related to type of swim venue
  - Fatality rate not related to swim start method

### USAT Review: Key Findings

- Athlete experience
  - Wide range of triathlon experience
  - Problem not confined to inexperienced athletes

# USAT Review: Key Findings

#### Cause of death during swim

- No evidence for:
  - Poor swimming ability
  - Typical drowning
  - Anxiety/panic
  - Wetsuit-related factors
  - Lack of warm-up
  - Unusual medical problems: stroke, seizure, syncope, SIPE, pulmonary embolism, trauma

# USAT Review: Shared Responsibility for Race Safety



USAT

Provide tools, resources, education, oversight, and monitoring

# USAT Review: Shared Responsibility for Race Safety

#### Reducing Triathlon-Related Fatalities: Shared Responsibility

Athletes	Event Organizers	USA Triathlon
<b>Responsibility:</b> Show up for the race healthy, fit, and prepared.	<b>Responsibility</b> : Design, plan, and conduct the event with athlete safety as a foremost priority.	<b>Responsibility</b> : Provide tools, resources, education, oversight, and monitoring.
<ul> <li>Visit your doctor for a physical examination with an emphasis on heart health <i>before</i> participating. Unrecognized heart problems are the primary cause of sports-related sudden cardiac death.</li> <li>Consult with your doctor about any warning signs during training such</li> </ul>	<ul> <li>The approved safety plan should account for unique features of an event's location, weather and participants.</li> <li>The safety plan should pay particular attention to the possibilities of bike crashes with serious, life-threatening injuries; and</li> </ul>	Provide education about race- related fatalities, causes, and potential solutions in curricula for coaches, race directors, and officials during respective certification courses and the annual USA Triathlon Race Director Symposium.
as chest pain/discomfort, shortness	sudden cardiac death at any point	Distribute information about the

## Shared Responsibility: Athletes

- Visit your doctor
- Warning signs
- Select an appropriate race based on health, fitness
- Appropriate race plan
- Choose a safe race
- Practice open water swimming
- Review race info
- Check your equipment
- During race, stop at 1<sup>st</sup> sign of medical problem
- Tend to fellow athletes
- Learn CPR

# Shared Responsibility: Event Organizers

- Unique event safety plan
- Rehearsed responses
- Extraordinarily robust swim safety plan
- Swim course design
- Communications systems
- Pre-race safety briefing
- Warm-up
- Sanction with USAT

# Shared Responsibility: USAT

- Distribute information
- Education
  - Coaches
  - Race Directors
- Best practice tools
- Sanctioning processes
- Ongoing review of fatalities, "near misses"
- Info from other governing bodies, research
- Annual reporting



## What's Next?

# **USAT Ongoing Initiatives**

#### Education

- Race Directors
  - Best Practices
  - Sharing Successes: 3 survivors of SCA in 2014
- Athletes
- Coaches
- Medical Professionals
- Safety Planning
  - Swim Safety Task Force

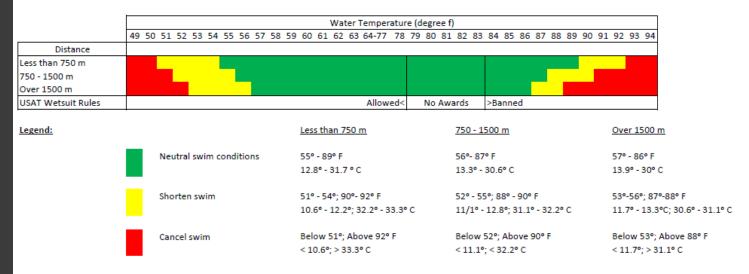
# USAT Swim Safety Task Force

- Temperature recommendations
- Better post-event reporting
  - Water temperature
  - #'s: starters, DNF, rescue (reasons), fatalities
  - Shorten, cancel
- Other safety considerations
  - Technical rules
  - Course design, marking
  - Race safety plan

# Water Temperature Recommendations



#### USAT Recommendations for Multisport Age-Group Swim Segments



These are recommendations to race management, local officials, and athletes.

Note:

2) Keep in mind, other factors will influence safety conditions including air temperature, humidity, acclimation, regional adaptation, and wind.

3) Water temperature measurement will conform to USAT methodology in the USAT Competitive Rules

4) USAT does not have a rule requiring mandatory use of a wetsuit, however, RD's may establish that rule.

# Next Steps in Research

Harris, et al. partnering with USAT

- Additional investigation of victims
  - Athletic history
  - Medical history
  - Resuscitation, treatment
  - Autopsy
- Questions:
  - Are the deaths related to athletic history?
  - How healthy were the victims?
  - What were the anatomic contributors?
  - Were there any "unusual" causes of death?

# Cause(s) of the Swim Deaths

#### One potential theory for SCD:

- Susceptible heart, athlete
  - Structural heart problems
- Specific triggering event. *Autonomic conflict*?
  - Sudden increase in both sympathetic and parasympathetic nervous system
    - ↑S: exertion, cold water, anxiety
    - 个P: facial wetting, water in mouth/pharynx, breath holding

Shattuck, Tipton. J Physiol 2012:590:3219-3230.

# International Olympic Committee

- >90% of SCD in athletes is due to preexisting heart conditions
- "A pre-participation medical test is recommended for high level athletes. It should be performed under the responsibility of a specially trained physician."



- World Rowing
  - Physical exam, EKG to compete in world championships
  - Elites, 2014
  - Age groupers, 2015

### International Triathlon Union (ITU) Current Recommendation

 "ITU encourages athletes to perform periodic health evaluation (PHE) and to undergo a pre-participation evaluation (PPE) prior to engaging in competitive sport."

## International Triathlon Union (ITU) Future Initiatives

- Endorse IOC Lausanne recommendations
- For junior, U23, elite:
  - Medical questionnaire
  - Physical exam
  - ECG (every 2 years)
- International registry of SCD incidents



Laurent Vidal, 1984-2015

# Summary

- Triathlon fatalities are rare
- Most occur during the swim portion
- Traumatic and non-traumatic causes
- Cardiac arrest predominates among non-traumatic causes
- Question:
  - Can we prevent/reduce number of fatalities?
- Shared responsibility for race safety



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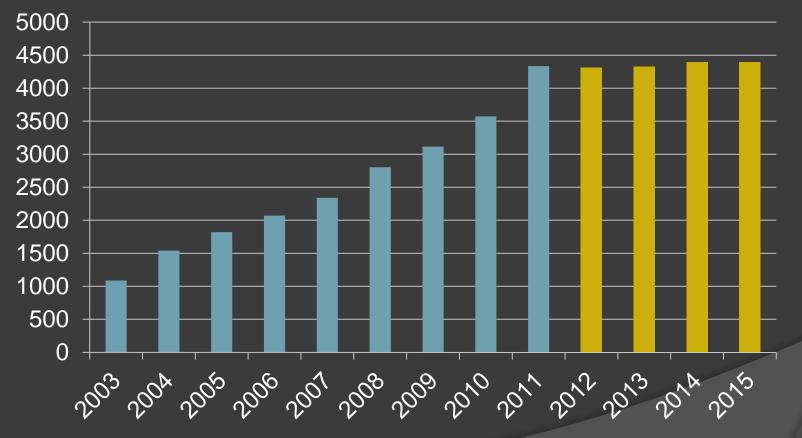
# USAT 2015 Update

# USAT 2015 Update

- Fatality Incidents Study, Fall 2012
  - 2003-2011
- What's happened since 2011?
  - Update through 2015 season

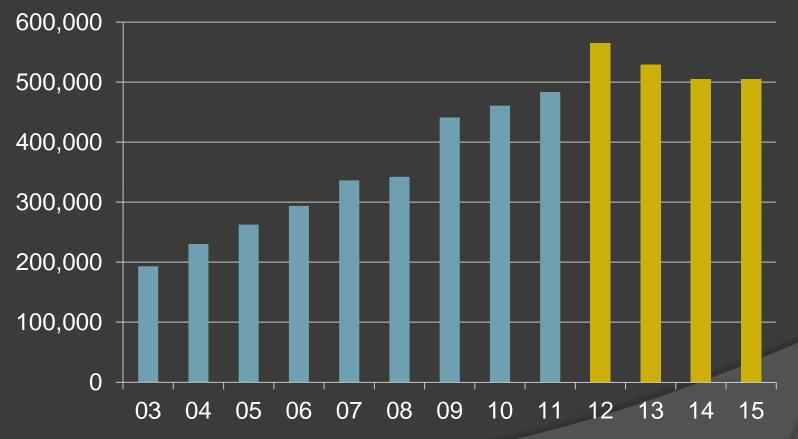
## USAT 2015 Update: Participation

#### **USAT-Sanctioned Events**



## USAT 2015 Update: Participation

#### **Adult Participants**

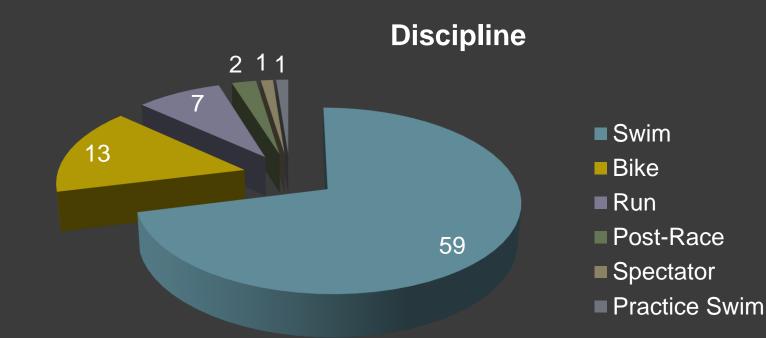


Year	Fatalities	Type of Fatalities
2003	1	to and and a second sec
2004	2	949 949
2005	7	SenSenSen 450 🛉 🗰
2006	3	uleu uleu
2007	6	- Lew - Lew - Lew - Mer I
2008	8	-sken alken alken alken alken alken ä
2009	3	- Jen Jo
2010	3	- Jen Jo
2011	12	
2012	14	$\ldots$
2013	9	LewLewLewLew 476 476 👖
2014	7	ulen ulen ulen ulen die 👖
2015	7	ulen ulen ulen de 🕴 🕴
Total	82	

# USAT 2015 Update: Fatality Rates

Year	Approximate Fatality Rate
2003	N/A*
2004	N/A*
2005	N/A*
2006	1 per 98,000
2007	1 per 56,000
2008	1 per 43,000
2009	1 per 147,000
2010	1 per 153,000
2011	1 per 40,000
2012	1 per 40,000
2013	1 per 58,000
2014	1 per 72,000
2015*	1 per 72,000*
Average 2006-2015	1 per 63,000

# USAT 2015 Update: Fatalities by Discipline



#### 2003 - 2015

# Cause(s) of the Swim Deaths

#### • Possibilities:

- Sudden cardiac death (primary arrhythmia)
- Typical drowning
- Trauma
- Medical problem
  - Acute MI
  - Seizure
  - Syncope
  - Swimming-induced pulmonary edema (SIPE)
  - Pulmonary embolism
  - Stroke
  - Anaphylaxis
  - Hyperthermia
  - Panic