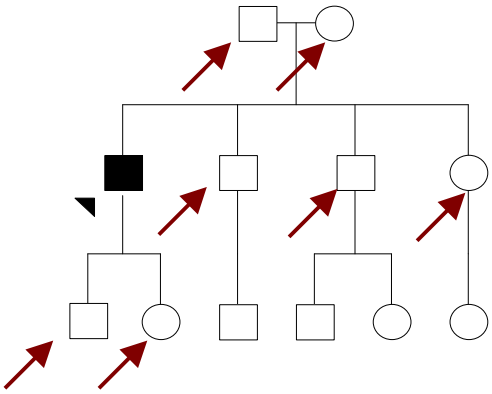
Cardiovascular Genetics Center
Brigham and Women's Hospital

CLINICAL SCREENING OF FAMILY MEMBERS

Hypertrophic Cardiomyopathy (HCM) is an inherited heart condition. Close family members (parents, siblings, and children) of a person who has been diagnosed should be evaluated, preferably by a cardiologist familiar with this condition.



Squares indicate males and circles indicate females. The darkened shape indicates a person that has been diagnosed with HCM. The arrows point to the first-degree family members who should be clinically screened for HCM. If the sibling of an affected person has a negative evaluation his/her children do not necessarily need to be screened unless symptoms develop.

GUIDELINES FOR CLINICAL SCREENING WITH PHYSICAL EXAMINATION, ECHOCARDIOGRAPHY AND ELECTROCARDIOGRAM (ECG OR EKG)*	
<12 years old	Optional unless: Severe family history of early HCM-related death, early development of LV hypertrophy, or other adverse complications Competitive athlete in intense training program Onset of symptoms Other clinical suspicion of early LV hypertrophy
12-18 years old	Repeat evaluation every 12-18 months
>18-21 years old	Repeat evaluation approximately every 5 years, or in response to symptoms. Tailor evaluation if there is a family pattern of late-onset LV hypertrophy or HCM-related complications

*Maron BJ et al. Proposal for Contemporary Screening Strategies in Families with Hypertrophic Cardiomyopathy. *J Am Coll Cardiol* 2004;44:2125-32.