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Colorado General Assembly House Committee on Public Health Care & Human Services 200 E. Colfax Avenue Denver, CO 80203

March 23, 2015

Dear Representatives:

I am pleased to write this letter in support of House Bill 15-1281 regarding newborn screening for critical congenital heart disease (CCHD).

Congenital heart disease is among the most common birth defects and is the leading cause of birth defect—related death. Some of the most severe congenital heart disease lesions are called critical congenital heart disease because they require medical attention or surgery urgently to prevent severe illness or death within days or weeks. Previous studies have found that up to half of children born with CCHD are discharged from the hospital undiagnosed thereby placing them at significant risk.

Pulse oximetry has been shown in numerous studies to be a safe and effective screening tool to help identify newborns with CCHD prior to hospital discharge. In the state of Colorado alone, approximately 300 infants are born each year with CCHD. Early diagnosis by screening with pulse oximetry could be life-saving for many of these children.

The vast majority of states across the United States have legislated pulse oximetry screening for all newborns based on the recommendation of the United States Secretary of Health and Human Services, the American Academy of Pediatrics, the American College of Cardiology Foundation, and the American Heart Association. Numerous studies of pulse oximetry at sea-level have demonstrated a specificity of 99.9% with a false-positive rate of only 0.05% on screens performed after 24 hours of life. Recent studies through Children's Hospital Colorado and the University of Colorado Hospital have shown the feasibility of such screening at our state's moderate altitudes. Additional studies are currently underway to evaluate screening at the most extreme elevations in our state (above 7,000 feet) and will be important in guiding future screening efforts at high altitude.

As a physician who cares for children with congenital heart disease, I can attest to the critical importance of early diagnosis and intervention. For infants with CCHD, early detection can mean the difference between a normal lifespan and a sudden, tragic death in the first month of life. For these reasons, I am in full support of this vital measure to ensure screening of all infants born in Colorado below an elevation of 7,000 feet as outlined in House Bill 15-1281.

Please do not hesitate to contact me if I can be of any further assistance in this matter.





Sincerely,

Christopher M. Rausch, MD
Director, Pediatric Cardiology Fellowship Program
Director, Cardiopulmonary Exercise Laboratory
Co-Director, Project ADAM Colorado
Children's Hospital Colorado and University of Colorado

Christopher.Rausch@childrenscolorado.org