Xxx

Principal/Clinic Manager

School/Clinic

Community

29th November 2012

Dear xxxx,

**Regarding: The gECHO study (Rheumatic Heart Disease Screening study)**

Between 2008 and 2010, your community participated in an important study undertaken by the Menzies School of Health Research. The aim of this study was to determine how many children may have evidence of Rheumatic Heart Disease (RHD), and to compare the results in remote and urban children. In this study, teams from Menzies came out and performed echocardiograms (heart ultrasounds) on children aged between 5 and 15 years whose families consented for them to participate. If any abnormalities were detected at the time of screening, children were referred to local medical services for follow-up.

In total, gECHO teams screened over 5000 Australian children in the Top End, Central Australia, Far North Queensland and the Kimberley region of Western Australia. In the two years since screening was completed, all of these images have been reviewed by a team of cardiologists in Australia and overseas, and the analysis of this data is now complete. The major findings of the study are as follows:

* **5245** children had echocardiograms
* **1015** children also had their heart listened to (auscultated) by a doctor or nurse.
* We found that auscultation was not a good way to detect RHD
* Overall, in **remote Indigenous communities** across Northern Australia we found that:
  + 7.3 per 1000 children had Definite RHD
  + 12.4 per 1000 children had Borderline RHD
  + Taking these figures together, up to 2% of Indigenous children screened may have early changes of RHD, and are either on treatment, or being followed up by the clinic.
* In **Caucasian children** in Darwin and Cairns, we found that:
  + No children had Definite RHD
  + 4.6 per 1000 children had Borderline RHD

This is the first study that gives us accurate rates of RHD in different communities. This information will be used to inform policy makers and to improve the delivery of RHD services in northern Australia. We are now looking at whether screening for RHD using echocardiogram could be a feasible and cost-effective way of finding early cases of RHD in children in remote communities.

We have included two different fliers which you may like to circulate within your community; we will also be sending them to the school. One is a simple summary of the study, and the other is more detailed, including specific figures for your community. If you have any questions about the results of this study, or any of the information we have provided, please don’t hesitate to contact us on 08 8922 7772, or by email as listed below.

We would like to take this opportunity to thank you again for your contribution to this important study.

Yours sincerely,

 

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