

Myocarditis and COVID-19

What is myocarditis?

Myocarditis is **inflammation or infection of the heart muscle** and most commonly occurs after a viral infection. Myocarditis is more common with COVID19 than with other viral infections including in our youth population. COVID19 myocarditis is common (~70%) in hospitalized patients and less common (~1%) in athletes, though it has been reported.

Why is it dangerous?

Due to the inflammation/infection of the heart muscle during myocarditis, the electrical system that controls the heart doesn't work properly. This can **result in life threatening arrhythmias and sudden cardiac death**. Athletics require the heart to work harder than it does at rest and this increased workload makes athletes more vulnerable to the complications of myocarditis. It is NOT safe to participate in sports if you have myocarditis.

Who should be screened for post-COVID-19 myocarditis?

Anyone over the age of 10 that plans to return to moderate or high-level sports should be screened, evaluated and potentially worked up for myocarditis prior to beginning their return to play progression. This not only includes our youth athletes but also adults that participate in athletics.

How do I know if I have myocarditis?

Symptoms of **chest pain/pressure, shortness of breath out of proportion to level of exercise, dizziness/lightheadedness, palpitations, feeling like you might pass out or actually passing out**, can all be symptoms of myocarditis. These should be reported to your healthcare provider and further evaluation should take place prior to exercise. In addition, there are also a subset of patients that will not have symptoms but will still have myocarditis. Therefore, after you have recovered from COVID, your physician will perform screening tests as needed to evaluate for myocarditis. These often include a **physical exam, an EKG and labs** to assess for cardiac inflammation. Based on the results of these tests further tests may be required before you are cleared back to the Athletic Trainers at your school to begin a **return to play progression**.

Is myocarditis curable?

The good news is that the **majority of myocarditis does resolve in 3-6 months** AND it's very **important that during the recovery phase we rest the heart**. This allows the heart to heal and helps to prevent the arrhythmias that can occur with myocarditis. A cardiologist will help during this recovery phase to guide treatment and return to play. We want all athletes to be able to participate in their sport and their safety and well-being is always our priority.

If you have additional questions or concerns, please reach out to your Certified Athletic Trainers