ONE HUNDRED SIXTEENTH CONGRESS

Congress of the United States

House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

Majority (202) 225–2927 Minority (202) 225–3641

April 18, 2019

Dr. Robert R. Redfield Director Centers for Disease Control and Prevention Atlanta, GA 30329

Dear Dr. Redfield,

I write today to request that the Centers for Disease Control and Prevention (CDC) provide Committee staff a briefing on the efforts CDC is taking to educate and prevent heat illnesses among youth athletes.

Exertional heat illnesses, including heat cramps, heat exhaustion, and exertional heat stroke are a concern for many parents and youth athletes, especially in the spring and summer months. More than 9,000 high school athletes are treated for heat illnesses each year, and hundreds more heat illness events are reported in collegiate athletics. Although exertional heat stroke is preventable and has a lower prevalence than other heat illnesses, it is responsible for two percent of sport-related deaths, and 15 percent of all football deaths annually.

Unfortunately, my letter comes in the wake of several of these avoidable tragedies, including one affecting a family in my home state of New Jersey. In August 2018, Braeden Bradforth, a New Jersey resident and gifted athlete, tragically died on the campus of Garden City Community College in Kansas, where he was recruited to play football. An autopsy revealed that his death was due to exertional heat stroke, which he suffered after an evening football practice.

¹ Zachary Y. Kerr et al., *Epidemiology of Exertional Heat Illness Among U.S. High School Athletes*, 44 Am. J. PREV. MED. 8 (2013).

² Susan W. Yeargin et al., *Epidemiology of Exertional Heat Illnesses in National Collegiate Athletic Association Athletes During the 2009-2010 through 2014-2015 Academic Years*, 54 J. Athl. Train. 55, 57 (2019).

³ *Id.* at 55.

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While a full investigation of the events surrounding Braeden's tragic and untimely death must be conducted, we know deaths from heat related illnesses are preventable. We should not waste any time in working to ensure that another family does not suffer a loss like the one the Bradforth family has endured. I appreciate that CDC has published tips and warnings for athletes in extreme heat,⁴ however the repeated examples of deaths from heat related illnesses remains troubling. I am concerned that players, coaches, trainers, and other athletics staff may not be aware of the warning signs and symptoms of heat-related illnesses, nor may they know how to treat heat-related illnesses when they occur. As a result, athletes may be exposed or suffer from heat-related illnesses that may be preventable.

As we approach the summer months, when many of these incidents occur, I ask that you provide me information about CDC's current activities related to promoting prevention and treatment techniques to youth and student players, coaches, trainers, and other athletics staff. I also request that you conduct a review of the CDC's current activities and provide the Committee an analysis of what additional efforts may be helpful for CDC or other government bodies to consider to prevent further tragedies going forward.

I am specifically interested in whether there are additional efforts that could be implemented to improve prevention and treatment information and outreach related to reducing heat related illness and catastrophic consequences. While there may be successful strategies for avoiding heat related illnesses and treating them when they present, I am concerned that these strategies are not being implemented often enough.

I appreciate your attention to this matter and would request that the briefing be scheduled no later than May 20. If you have any questions, please contact Stephen Holland of the Committee staff at (202) 225-2927.

Sincerely,

Frank Pallone, Jr.

Chairman

⁴ See Centers for Disease Control and Prevention, *Heat and Athletes* (June 19, 2017) (www.cdc.gov/disasters/extremeheat/athletes.html).