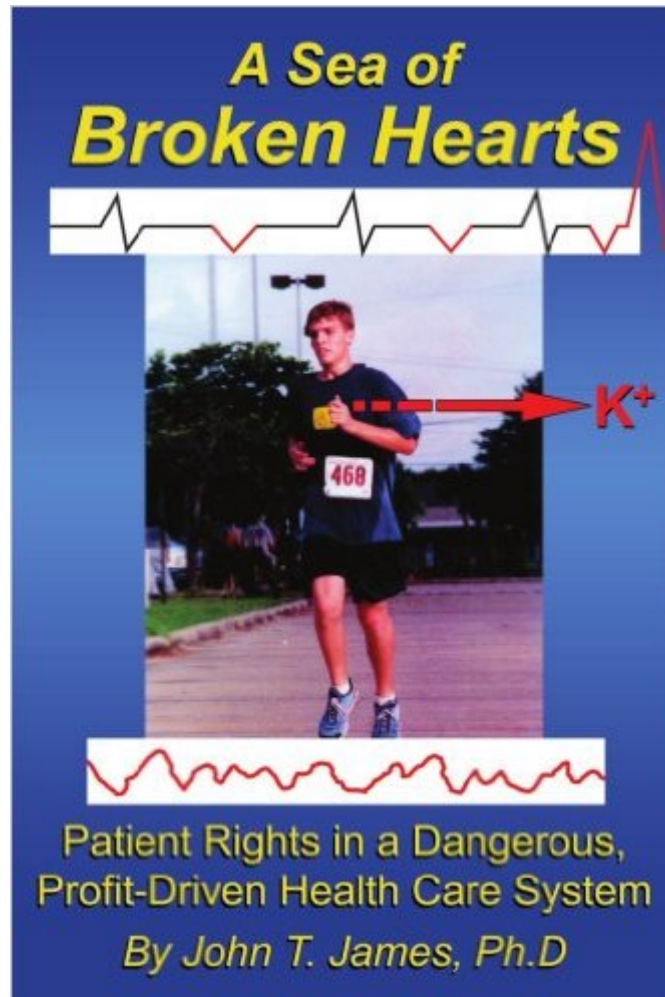


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# A Sea Of Broken Hearts: Patient Rights In A Dangerous, Profit-Driven Health Care System





## Synopsis

This is a must-read for summer runners, baby-boomers, and anyone who suspects that they or a loved one has been harmed by medical errors in our health care system. Hundreds of thousands of Americans die each year from medical errors, but most mistakes are kept secret from patients. After learning a few basic tools of cardiology, the reader shares a journey of heartbreaking mystery and discovery as a father pieces together the events that led to the death of his 19-year old son, despite extensive evaluation by a "team" of cardiologists. That personal struggle opens into a broad-ranging examination of our profit-driven health care system. The story concludes with an appeal for ten patient's rights to protect us all before we personally encounter the dangers of our health care system.

## Book Information

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## Customer Reviews

"A Sea of Broken Hearts" is a heart wrenching story and expose of how the author's 19-year-old son, Alex, died because of "uninformed, inattentive, and unethical medical care." The full title is "Patient Rights in a Dangerous Profit-Driven Health Care System" by John T. James, PhD.ALEX DIESThe author's son, Alex, was a very physically fit young runner who collapsed while running at his Texas University. He recovered spontaneously, but was taken by ambulance to a hospital. He had occasional Premature Ventricular Contractions (PVCs) and a high QTc (ECG interval from the start of the Q wave to the end of the T wave) of 480 ms. Running in the Texas heat caused him to be low on potassium (hypokalemia). But replenishing his stores of potassium (and magnesium) was



not considered. Basic Cardiology would diagnose a high QTc as "acquired long QT syndrome (LQTS)" which is a risk of low potassium, but this wasn't done. (PVCs are usually benign, but are known to be a gateway to SCD [Sudden Cardiac Death] p. 76.) Instead Alex was talked into having a costly left heart catheterization procedure which seemed to damage one of his ventricles. WHY ALEX DIED Alex wasn't informed in writing that he shouldn't run. He did go running again and died. (I am skipping over many of the details of Alex's death which his father covers very thoroughly.) Here are some of the failings and errors Dr. James lists that his son experienced: \* Didn't follow national guidelines for potassium replacement. \* Didn't make the obvious diagnosis of acquired LQTS. \* Didn't know a QTc of 490 ms is abnormal. \* Failed to get genuine informed consent for catheterization procedure.

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