UC San Diego Health

Heart Stopping Ride

By Michelle Brubaker | June 28, 2018

t was a typical sunny day in San Diego and 25-year-old John Lozick, an avid cyclist, was pedaling to Pacific Beach. "I just wanted to get some exercise," said Lozick. "I can't believe what happened."

Lozick doesn't actually remember what happened. In fact, he doesn't remember leaving the house.

"My next memory is waking up in a hospital bed at UC San Diego Health with tubes connected to me and down my throat. I had an intense pain in my chest. I'm a mechanic and I compare the pain to having a car lifted in the air and then slowly being lowered onto my chest while lying under it.

"I heard my brother, Eric, say, 'John, you had a heart attack.' I was in shock."

Lozick had collapsed during his bike ride. Thankfully for him, two physicians happened to be nearby when he hit the pavement at Mission Beach. "It was fate that they were there," said Lozick, who says his original plan to ride with his brother in an isolated mountain range in Los Angeles fell through at the last minute. "If I would have had the heart attack there, the outcome would have been much different. I was in the right place at the right time. Those doctors are my angels in disguise."

An emergency physician visiting from Las Vegas was driving behind Lozick when he crashed; an emergency physician from UC San Diego Health was running behind Lozick on the same path.

"Shortly after I stopped and assisted the physician from Las Vegas with CPR, lifeguards and paramedics arrived on scene and the patient was taken to the emergency room at UC San Diego Medical Center in Hillcrest. It was a true collaborative effort," said Kelly Dilorenzo, MD, the emergency physician at UC San Diego Health who had been running behind Lozick.

With no evidence of trauma, physicians initially thought Lozick had an arrhythmia (irregular heart beat) or a pulmonary embolism (a blood clot in the lung). "It was not a slam dunk for diagnosing a heart attack because of his age," said Nancy Glober, MD, emergency physician at UC San Diego Health.

Just minutes after Lozick was rushed through the emergency room doors, Glober and her team were able to get his pulse back, though "we were worried we would lose it again."



John Lozick returns to lifeguard headquarters to get his bike back. From L-R: Lifeguard Daryl Pawlack, Lt. Rick Romero, John Lozick and Lifeguard Jeff Hatfield.

"I had iust left the hospit al and was driving home when the emerg ency physic ians called me," said

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nce Ang, MD, an interventional cardiologist at UC San Diego Health. "We spoke about the patient's critical condition and I immediately turned around."

Electrical activity recordings (electrocardiogram) and a sonogram of the heart (echocardiogram) were performed, providing evidence of a heart attack. Ang performed an emergent coronary angiogram, injecting contrast dye under x-ray imaging to identify heart artery blockages. The screening showed a 100 percent blockage of the left anterior descending artery (LAD), the main artery down the front of the heart. In lay terms, Lozick had had a massive heart attack.

"A coronary stent was then inserted in the patient's LAD to clear the blockage and restore blood flow," said Ang.

Cardiologists worked throughout the weekend to carefully tailor medical treatments to Lozick's heart. The medical team also discovered his father had died from a cardiac event. He was only 32.

"I never thought I would fall prone to a heart attack," said Lozick. "I thought I was in very good shape and there were no former signs that indicated I had a health problem. It's so important to know your family's genetic history and your risk factors. My brother is also an avid cyclist and has been tested for health concerns. Knowledge is power."

"There is no question that John had a genetic predisposition," said Anna McDivit Mizzell, MD, cardiologist at UC San Diego Health, who will see Lozick for his follow-up care.

After seven days in the hospital, Lozick was discharged.

"When I walked out of the hospital, I got down and grabbed a handful of grass and smelled it with tears in my eyes. I got home and opened the windows and listened to the birds chirping," said Lozick. "I'm so unbelievably grateful to be alive."

"I really wanted the best outcome for him, as you do with every patient, but there are some who strike you a little harder," said Glober, who visited Lozick several times after he was admitted.

"I followed his chart after he left the emergency department, and when I read that he was awake and doing well, I was so happy I could have jumped out my seat. I even made a special trip after my shift to meet him," said Chuck O'Connell, MD, emergency physician at UC San Diego Health, who was part of Lozick's medical team. "It was one of the best cases of my career."

Lozick will continue to take medication and is planning to start cardiac rehabilitation at UC San Diego Health soon.

"He is doing miraculously well from all stand points," said McDivit. "The CPR administered on scene and the comprehensive care at UC San Diego Health saved John's life. I'm honored to know him and see him get a second chance."

Lozick said besides soreness in his rib cage from the CPR, he is feeling stronger every day, eating healthier and looking forward to getting back on his bike. "I cannot thank the individuals involved enough. It's hard to put into words. It's too emotional. It's been a wild ride."

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