

Defibrillators are now mandatory at some gyms and stadiums. So why aren't more people using them?

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Because athletes young and old can suffer cardiac arrest, some states have mandated the placement of automated external defibrillators



(AEDs) in gyms, stadiums and other sports venues. But a new study finds the use of AEDs by bystanders for cardiac arrest at athletic sites didn't improve much after states enacted these laws.

The bottom line: "Legislative efforts alone may not be sufficient to improve bystander AED use," contend the authors of a study published Jan. 2 in the journal <u>JAMA Internal Medicine</u>.

Recent high-profile cases, such as the collapse on the field of Buffalo Bills player Damar Hamlin exactly one year ago, have placed the spotlight on cardiac arrest among <u>young athletes</u>.

Hamlin was lucky enough to receive CPR plus the rapid application of an AED, and has since made a full recovery.

Numerous states have enacted laws to have AEDs nearby at athletic venues, should similar crises occur.

The new study was led by Dr. Ahmed Kolkailah, a cardiologist at the University of Texas Southwestern Medical Center in Dallas. His team analyzed data from a national registry on cardiac arrest events and survival, to track how often AEDs were used in states with or without such mandates.

They focused on 13 states that had such laws in place before 2020, and 27 states that did not. A total of 4,145 cases of cardiac arrest occurring between 2013 to 2021 were included.

The researchers found that in states where AEDs were mandated at athletic facilities, these devices were used by bystanders just 19% of the time when a <u>cardiac arrest</u> occurred.

That was just slightly higher than the 18.2% observed in states without



such laws.

Survival rates were also similar: 44.5% in <u>states</u> with the AED mandates, 45% in those without, Kolkailah's group found.

Even in the "best-performing" state with an AED mandate in place, the devices were only used in less than a third (28.8%) of cases, the report found.

According to the Texas team, in a crisis it may not be enough to simply mandate that an AED be somewhere on the premises.

These devices need to be easily found, and that might mean tracking their location via GPS, implementing better signage, and the "continued education of facilities staff and the lay public" into how to find and use an AED, Kolkailah's group said.

"Additional efforts are needed to overcome barriers for public access defibrillation," the researchers concluded.

More information: Ahmed A. Kolkailah et al, Automated External Defibrillator Use After Out-of-Hospital Cardiac Arrest at Recreational Facilities, *JAMA Internal Medicine* (2024). DOI: 10.1001/jamainternmed.2023.7248

Find out more about AEDs at the American Red Cross.

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