



Sudden Cardiac Arrest Association

POWER AND PASSION... SAVING LIVES

Testimony of Chris Chiames
Executive Director, Sudden Cardiac Arrest Association
Before the Illinois House Committee on Mass Transit
February 25, 2010

In support of House Bill 4661, requiring automated external defibrillators (AEDs) for mass transit systems

Chairwoman Hamos and members of the Committee:

My name is Chris Chiames. I am executive director of the Sudden Cardiac Arrest Association. SCAA is the nation's largest public advocacy organization exclusively dedicated to sudden cardiac arrest (SCA) awareness and prevention. Our members include SCA survivors, patients at risk, physicians, nurses, emergency medical professionals and others who have been touched by SCA. We have nearly 50 chapters and affiliates in the country, including the Greater Chicago chapter and the Gateway chapter of Greater St. Louis. In addition to my testimony, I am submitting letters of support from those two chapters.

Sudden cardiac arrest is the nation's leading cause of death. A previous heart attack or coronary artery disease are among the risk factors. Nearly one million Americans most at risk have implanted cardioverter defibrillators to provide 24/7 protection. Even so, nearly 300,000 Americans die from SCA each year. It usually strikes without warning. The victim collapses when his or her heart goes into a fast, faint and frenetic beat. Only the shock of an automated external defibrillator (AED) to restore a natural heart rhythm can save the patient. And that shock must be delivered quickly. Your chance of survival decreases 10 percent with each minute delay. So a person waiting more than 10 minutes for an AED shock (or shocks) has virtually no chance of survival.

AEDs are easy to operate and maintain. They are now commonplace on all airliners, virtually all major airports, shopping malls, amusement parks and many other public venues. Amtrak went so far as to not only implement a large scale AED deployment program – it also trained every single employee in CPR – more than 6000 people total. Commuter rail systems like the Virginia Railway Express and mass transit systems like the Washington Metro have AEDs. It defies logic why they are not on the in-state systems here in Illinois, as AEDs are a basic health and safety tool for both passengers and employees.

No one questions the effectiveness of AEDs. Metra spokespersons have even acknowledged that they have looked at expanding their AED deployment but have not deployed them because costs are prohibitive. I am not a lawyer, but it seems to me that saying “we should have them, but choose not to” opens up the transit authority and the taxpayers to future liability claims when there are future SCA events. In February 2009, the Massachusetts Bay Transportation Authority settled a six-year-old case with the

widow of a passenger for \$3.9 million plus associated legal fees related to its failure to have AEDs in place.

My sense is that much of the debate around this legislation is with regard to the so-called "unfunded mandate" that imposes added costs on the transit agencies that would be impacted by the bill. However, this is only an unfunded mandate because those transit agency leaders have thus far failed to do the right thing by voluntarily deploying AEDs. I am certain neither this committee nor the taxpayers would allow these same agencies to say "We know we need to replace the brakes on our trains more frequently, but we could not afford to." But that is essentially what they are saying when it comes to AEDs.

We have seen too many times where business or government leaders take the position that they cannot afford an AED program, only to scramble to put one in place AFTER an SCA fatality. SCAA firmly believes that there *are* funding solutions if transit leaders are committed to solving the problem. There may even be ways to lower the costs through some creative marketing, sponsorship and signage opportunities. But that requires a dedicated resolve to finding a solution.

Back last October when Metra had the unfortunate death of one of its passengers, our organization was holding its annual meeting in Chicago. At that time, we delivered a letter to Metra Chairwoman Carole Doris signed by dozens of our volunteers – including Illinois citizens – urging that the agency move forward on an AED deployment plan. That letter is attached for the hearing record. To date, we never received any response or even an acknowledgement of our correspondence. I was not aware that public officials and agencies could choose to simply disregard inquiries, and view the lack of response as an indication of the agency's refusal to responsibly address this issue.

Our preference is for the transit agencies and its employees to embrace an AED program, find a way to finance it, manage it appropriately, and promote it with its riders as a customer safety initiative. But if they must be forced to take action through legislation, then I urge this committee to move forward on this proposal.

Thank you for your interest in this important matter.



Sudden Cardiac Arrest Association

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Greater Chicago Chapter
c/o Midwest Heart Foundation
1919 S. Highland Avenue, Suite 201B
Lombard, IL 60148

February 22, 2010

Honorable Julie Hamos
Chair
Committee on Mass Transit
Illinois General Assembly
State Capitol
Springfield, IL 62706

Dear Chairwoman Hamos:

The Greater Chicago chapter of the Sudden Cardiac Arrest Association (SCAA) strongly supports House Bill 4661, to require automated external defibrillators (AEDs) on commuter and mass transit rail systems.

SCAA brings together survivors, patients, medical professionals and others touched by sudden cardiac arrest (SCA) to advocate for better emergency systems and programs to respond to SCA. The centerpiece of better response involves immediate access to CPR and AEDs to shock the heart back to a normal rhythm. AEDs should be wherever there are large groups of people to enhance response - in fact, they are in place at venues like Chicago O'Hare and Midway airports and McCormick place. AEDs are also in place on all airliners. Our busy train system should have AEDs to allow for better response to passenger and crew medical emergencies.

AEDs have become the expected standard of care, and in fact, the Massachusetts Bay Transportation Authority recently settled a case for \$3.9 million when the widow of a passenger filed suit over the agency's *failure* to have AEDs. Not having AEDs puts the lives and money of Illinois taxpayers at risk. We urge you to enact this legislation.

Sincerely,

Chris Rambke
Chair

Cash Casey, MD
Medical Director

Joseph Marek, MD
Midwest Heart Specialists



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Gateway Chapter
1210 St. Patrice Lane
Florissant, MO 63031

February 22, 2010

Honorable Julie Hamos
Chair
Committee on Mass Transit
Illinois General Assembly
State Capitol
Springfield, IL 62706

Dear Chairwoman Hamos:

The Gateway chapter of the Sudden Cardiac Arrest Association (SCAA) works in the greater St. Louis metropolitan area (including the Illinois suburbs) to raise awareness about sudden cardiac arrest (SCA) and promote solutions to prevent sudden cardiac death. We are pleased that your committee is holding a hearing on the subject of automated external defibrillators (AEDs) on commuter and mass transit rail systems and urge your support of House Bill 4661, as amended.

AEDs are the most effective method to resuscitate a sudden cardiac arrest (SCA) victim. They are safe, easy to use and affordable. AEDs are now commonplace in public venues and public transportation systems, most notably on airliners and in airports. In fact, some of our members are SCA survivors thanks to AED programs in public transportation. On the rail side, Amtrak has a broad AED deployment program as do transit agencies such as the Washington Metropolitan Area Transit Authority and the Massachusetts Bay Transportation Authority. Illinois residents and visitors deserve the same protection.

We urge you to enact House Bill 4661.

Sincerely,

Linda Dickson
Chair of the Gateway Chapter