Having the Heart to Tackle a Public Health Crisis

Every two minutes an American dies from sudden cardiac arrest (SCA) – not breast cancer, lung cancer or HIV/AIDS, combined. By the end of 2011, nearly 300,000 Americans will die from SCA, making it the nation's leading cause of death. Sadly, only seven percent of victims survive.

These statistics are sobering, and what is sobering must also serve as a wake up call. Medical professionals, educators, patient advocates and concerned citizens together have identified effective ways to increase survivability of SCA, and so there is a great deal this country can do *today* to reduce deaths from SCA *tomorrow*.

SCA is not a newly identified condition that researchers are just now beginning to understand. Unlike a heart attack, where an artery becomes blocked, SCA is when the heart suddenly and without warning stops. SCA strikes anyone and everyone, and when we hear of professional athletes and children dying from SCA, our minds pause in disbelief. Although experts do not yet fully understand the causes of SCA, we know how to prevent it for those at risk and treat it for those who arrest. CPR and the use of an automated external defibrillator (AED) alone could save as many as 50 percent of SCA victims.

While there has been some progress in placing AEDs in public gathering areas, the 111th Congress failed to pass the Josh Miller HEARTS Act, which would establish funding for AEDs to be placed in schools across the country. Several states and local jurisdictions have passed legislation requiring AEDs at schools, athletic events and other public venues. A national approach, however, would ensure every person has the same fighting chance to survive, and we urge the 112th Congress to quickly address this lifesaving legislation.

We also know that an innovative treatment called therapeutic hypothermia can yield positive neurological outcomes in SCA victims. Yet, many hospitals and EMS providers are not equipped to deliver such care. Furthermore, universally accepted standards for this treatment have yet to be identified by the federal government. We therefore urge the 112th Congress to support federal research into the "best practices" of therapeutic hypothermia and to work with EMS agencies across the country to embrace this promising treatment.

Last month's tragic shootings in Arizona remind us that emergency response can mean the difference between life and death. If someone you love experienced SCA, you wouldn't just *hope* an AED was nearby. You wouldn't just *wish* the closest hospital was capable of providing cutting edge care. Understandably you'd want your loved one to have the best possible chance at surviving SCA with little if any neurological damage.

February is Heart Month – a perfect time for us to urge federal lawmakers to step up their response to the nation's leading cause of death. Locally, we can reflect on our own community preparedness in response to the public health crisis of SCA, and that's as simple as identifying locations of AEDs and learning what we can do as bystanders.

We know what we should be doing, the question is: why aren't we doing it?

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