Survey: Half of respondents wouldn't use AED

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BUFFALO, N.Y. — If you were in a public place and saw someone suddenly collapse, would you use a nearby defibrillator to revive him or her? In a survey of 1,000 adults, more than half answered, "no."

Automated external defibrillators (AEDs) are the best — and often last — hope for people who collapse because their hearts have lapsed into a fast, irregular and deadly heartbeat known as ventricular fibrillation. These shock-delivering devices are becoming standard fixtures in airports, malls, casinos, office buildings and other public places. They're so easy to use, and the directions printed on them are so clear and straightforward, that even schoolchildren can quickly learn to use the devices.

To gauge the readiness of the most likely rescuers — untrained bystanders — Dutch researchers surveyed passers-by in Central Station, a busy rail station in downtown Amsterdam. Each interview was conducted within 10 feet of one of the five AEDs prominently displayed in the station.

More than half of those who took part in the survey could not identify the glass-fronted box on the wall as an emergency defibrillator. And only 47 percent said they'd use the AED if needed. The most common reasons for declining to use the device were not knowing how it works (69 percent) and worries about hurting the victim (14 percent).

In order for someone to use an AED, he or she must 1) know that a defibrillator could help revive someone who suddenly collapses, 2) know that AEDs are available in some public places, 3) be able to identify an AED, and 4) be willing to use the device. In the Dutch study, less than 20 percent of those surveyed met these four requirements (Annals of Emergency Medicine).

Automated external defibrillators use the same basic steps. Most also have a gentle but authoritative computerized voice that gives the user easy-to-follow instructions.

Turn on the machine. Most have a large, unmistakable ON button.

Attach the pads to the victim's chest. The heart-shocking current comes from two hand-sized pads. You stick one on the upper part of the person's right chest, just below the shoulder. The other goes on the left side, below the nipple, near the armpit. Both must be placed on bare skin.

Wait while the machine analyzes the heart rhythm. Sensors in an automatic defibrillator record and analyze the heart rhythm, just as an electrocardiogram does. If the sensors detect ventricular fibrillation, the machine tells you to go to the next step. If they don't, the machine won't deliver a shock, even if you push the "shock" button.

Deliver the shock. If the victim's heart is in ventricular fibrillation, you'll be instructed to press the shock or rescue button. The machine then checks the heart rhythm again before telling you if another shock is needed.

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