Available online at www.sciencedirect.com

Resuscitation

journal homepage: www.elsevier.com/locate/resuscitation

Letter to the Editor

Myth of the stolen AED

Sir,

Public access defibrillation (PAD) programs have been deployed in many countries around the world as a means to supply bystanders with the ability to defibrillate an out of hospital cardiac arrest (OHCA) prior to emergency medical service (EMS) arrival. Studies have suggested some improvement in OHCA survival outcomes, while also highlighting concerns in how effective PAD programs really are.[1,2] One concern that is brought up prior to implementation of PAD programs is the likelihood of theft or vandalism of automatic external defibrillators (AEDs) associated with the program. However, the literature on AED theft is sparse, and the only published data we could find was over 10 years old.[3] We aimed to identify whether large cities in the United States experienced theft or vandalism of publicly accessible defibrillators in their purview within the past three years.

We conducted a telephone survey of PAD programs in the largest city in each US state and the District of Columbia. For each city, we attempted to identify the entity predominantly responsible for PADs. Candidates included public safety and EMS agencies, academic institutions, and healthcare systems. Each entity was queried briefly on their experience, if any, with theft or vandalism of AEDs in the years 2015–2018, including the quantity and characteristics of any theft or vandalism in this period and whether they maintain an AED database or registry in their region that might include this information.

Surveys were successfully administered to entities in all 51 cities. Of these, 32 (63%) had a PAD database, a total of 9 cases of AED theft were reported in 7 (14%) different cities, and there were no reports of AED vandalism. One agency reported a history of theft, but did not specify the number of thefts, their locations, or whether they were officially tracked in a PAD system. AEDs were reported to have been stolen from a bike trail, two police vehicles, and various publicly accessible buildings.

In this limited, survey-based study conducted in 51 large US cities, AED theft was rare and no vandalism was reported.

Conflicts of interest

None.

REFERENCES

1. Eckstein M. The Los Angeles public access defibrillator (PAD) program: ten years after. Resuscitation 2012;83:1411–2.
2. Sidebottom DB, Potter R, Newitt LK, Hodgetts GA, Deakin CD. Saving lives with public access defibrillation: a deadly game of hide and seek. Resuscitation 2018;128:93–6.
3. Peberdy MA, Ottingham LV, Groh WJ, et al. Adverse events associated with lay emergency response programs: the public access defibrillation trial experience. Resuscitation 2006;70:59–65.

Jessica Salerno*
Connor Willson
Leonard Weiss
David Salcido
University of Pittsburgh School of Medicine, Department of Emergency Medicine, United States

* Corresponding author.
E-mail address: jek118@pitt.edu (J. Salerno).

Received 22 April 2019

http://dx.doi.org/10.1016/j.resuscitation.2019.04.036