

Reducing Stress Related Fatalities in the Fire Service
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The most recent National Fire Protection Association report on firefighter fatalities indicates that heart attacks remain the largest single concern. Since 1979, heart attack deaths are down by over 30%, however they still consistently account for nearly half of total deaths annually.

Making these numbers even more unfortunate is that in the majority of these cases, the individuals were already known to have had serious health problems such as heart disease, hypertension, and diabetes. In fact 51.5% of all of those who have died as a result of heart attacks had known prior heart problems. In one extreme case a firefighter died while he was being evaluated for heart transplant surgery, but remained active in his department as a driver and exterior firefighter until his death.

Of the other heart attack deaths 32% had arteriosclerosis, 8.9% suffered from hypertension, 4.1% had diabetes, and only 3.6% had no previous history or symptoms at the time of their deaths. Also during this period, two-thirds of all deaths involving firefighters over the age of 40 were heart attack related, as were three-fourths of those involving members over 60.

These numbers indicate that while there have been strides in safeguarding the health of firefighters there is still a great deal of work ahead. It is essential that continued medical screening of new applicants and regularly scheduled health assessments be accomplished as well as maintaining at least minimum levels of fitness throughout the member's service time.

In addition to proper screening and fitness, duty selection is also extremely important. The fact that a member has indications of a cardiac problem should not preclude them from being a valuable member of their department. In the volunteer sector, there are many administrative and low stress positions that these members may fill quite safely. These are usually duties which are necessary for the efficient operation of the department, and with some imagination on the part of the department leadership, exposure to high stress situation may be eliminated or reduced

A thirty-year member of a volunteer department who had open heart surgery returned to his department expecting to go back to full duty. The Department leadership did not want to permit this, but instead of simply denying him the opportunity to serve, they gave it some thought and bought a video camera, making him the official videographer of the department. This gesture was meant to simply appease the long time member, however within six months, the department had changed four policies because of things they had seen themselves doing on the videos. The member is proud to continue to be a valuable asset to his department.

It is imperative that the health care professional conducting the health screening be aware of the various types of duties that the members may be assigned to so that they may make a proper determination of risks. And it is incumbent upon the department leadership to provide the medical professional with that vital information in an accurate and understandable manner.

Sometimes it is difficult to tell a member that their service must be reduced, however it is much easier to do that then visit them in a hospital...or worse.