To the Editor:

We were pleased to read the article by Gundry et al on the use of automatic external defibrillators (AEDs) by children; their study confirmed the results of our study on a similar topic, which was published 1 year previously. The study by the Seattle group used a design similar to ours and even included the same AED used by the subjects in our study. We compared untrained and adult cardiac life support–trained adults in a simulated cardiac arrest situation. We showed that untrained lay persons could deliver the indicated 3 sequential (“stacked”) shocks with an AED in all cases of simulated sudden cardiac arrest due to ventricular fibrillation, without any prior instruction. The findings of both studies compare well and endorse the need for public access defibrillation, without any prior instruction. The findings of both studies compare well and endorse the need for public access defibrillation, as was proposed by the American Heart Association in 1995. Strategic placement of AEDs has proven usefulness in the field. The question of duration of training seems to be irrelevant by now, because both Gundry et al and our group have shown that lay persons in the United States and Europe can use AEDs without prior training.

Comparison of Naïve Sixth-Grade Children With Trained Professionals in the Use of an Automated External Defibrillator
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