

**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
TRANSPORTATION COMMITTEE
Monday, February 7, 2005**

**SB 721, An Act Requiring The Use Of Helmets By Motorcycle
Operators And Passengers**

The Connecticut hospital Association (CHA) appreciates the opportunity to testify in support of **SB 721, An Act Requiring The Use Of Helmets By Motorcycle Operators And Passengers**.

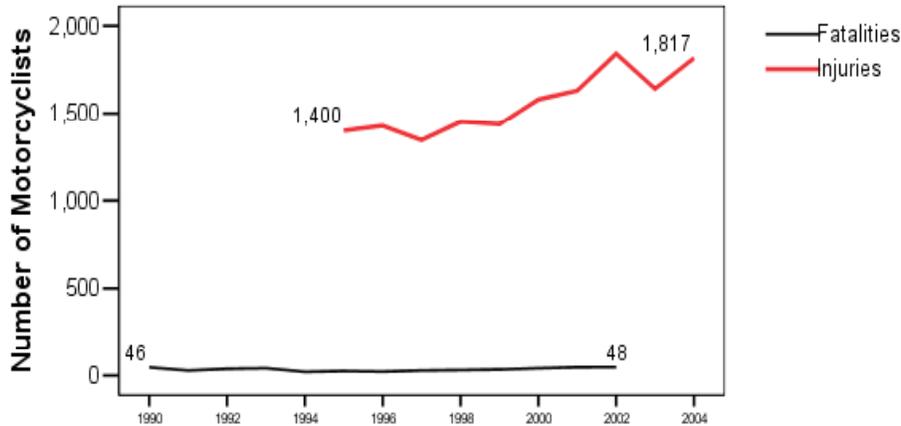
SB 721 requires all operators of and passengers on motorcycles to wear protective headgear. An average of 34 motorcyclists are killed on Connecticut's roadways every year. Another 1,557 on average are injured. Motorcycle use has been reported to be the strongest predictor of a subsequent fatal accident¹ in men, who represent 93% of those killed or injured on motorcycles in Connecticut. A direct comparison of motorcycle mortality between Connecticut and New York, which has a mandatory helmet law, showed that helmet use was higher in New York than in Connecticut (91% vs. 18%). Mortality was higher in Connecticut than in New York (15% vs. 6%)².

The risks associated with motorcycle use can be mitigated by wearing a helmet, as demonstrated by the experience of states that have either passed or repealed motorcycle helmet laws. On July 1, 1997, Arkansas became the first state in 14 years to repeal its adult helmet law. The result was that nonhelmeted deaths at the scene of a crash significantly increased from 19 of 48 (39.6%) (1995-1996) to 40 of 53 (75.5%) (1998-1999). Before repeal, 25% of nonfatal crash admissions were nonhelmeted (18 of 73). This significantly increased to 54% (52 of 96) after repeal³. Failure to wear a helmet has been shown to significantly increase the incidence and severity of head injuries among motorcyclists³.

Maryland enacted an all-rider motorcycle helmet law on October 1, 1992. In Maryland, the motorcyclist fatality rate dropped from 10.3 per 10,000 registered motorcycles prelaw to 4.5 postlaw despite almost identical numbers of registered motorcycles. Motorcyclists wearing helmets had a lower risk of traumatic brain injury than those not wearing helmets⁴.

In addition to the personal costs related to increased injury severity among nonhelmeted motorcyclists, there is an additional financial burden on hospitals as well. In one study, helmet use decreased mean cost of hospitalization by more than \$6,000 per patient⁵. It also has been reported that injured motorcyclists who were not wearing helmets had an increased use of hospital resources with their helmeted counterparts^{5,6}.

Injuries (1995-2000) and fatalities (1990-2000) among motorcycle riders in Connecticut



Motorcyclists identified by ICD-9 Codes: E810-E819(.2,.3).

As caregivers of those involved in motorcycle accidents, hospitals know all too well the large number of fatalities and injuries of operators and passengers who do not wear protective headgear. Emergency department staff struggle everyday to save the lives of patients injured in motorcycle accidents, and hospitals see this bill as a significant step toward reducing the number of injuries and deaths by operators and passengers of motorcycles who do not wear protective headgear.

Thank you for your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.

The following are the data sources and references for CHA’s testimony:

Data Sources

1. Connecticut Hospital Association, Connecticut Health Information Management Exchange data, 1995-2004
2. National Center for Health Statistics, Vital Statistics System for numbers of deaths, 1990-2002.

References

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2. Proscia N, Sullivan T, Cuff S, Nealon P, Atweh N, DiRusso SM, Bandanza D. The effects of motorcycle helmet use between hospitals in states with and without a mandatory helmet law. *Conn Med* 2002 Apr;66(4):195-198
3. Bledsoe GH, Schexnayder SM, Carey MJ, Dobbins WN, Gibson WD, Hindman JW, Collins T, Wallace BH, Cone JB, Ferrer TJ. The negative impact of the repeal of the Arkansas motorcycle helmet law. *J Trauma* 2002 Dec;53(6):1078-1086.
4. Auman KM, Kufera JA, Ballesteros MF, Smialek JE, Dischinger PC. Autopsy study of motorcyclist fatalities: the effect of the 1992 Maryland motorcycle helmet use law. *Am J Public Health* 2002 Aug;92(8):1352-1355.
5. Brandt MM, Ahrns KS, Corpron CA, Franklin GA, Wahl WL. Hospital cost is reduced by motorcycle helmet use. *J Trauma* 2002 Sep;53(3):469-471.
6. Hundley JC, Kilgo PD, Miller PR, Chang MC, Hensberry RA, Meredith JW, Hoth JJ. Non-helmeted motorcyclists: a burden to society? A study using the national trauma data bank. *Journal of Trauma*. 2004 Nov;57(5):944-949.