

Butting heads over bicycle helmets

Although the need for bicycle helmet legislation was recently questioned in *CMAJ*,¹ the question of whether helmets are being properly strapped on remains unanswered.² How many adults — and even more children — wear their helmets either unstrapped or poorly strapped and hanging loosely over their occipital areas? An improperly strapped helmet is worse than worthless: it conveys a false sense of being protected.

Wilhelm Kreyes
Retired Physician
Winnipeg, Man.

References

1. Chipman ML. Hats off (or not?) to helmet legislation [editorial]. *CMAJ* 2002;166(5):602.
2. LeBlanc JC, Beattie TL, Culligan C. Effect of legislation on the use of bicycle helmets. *CMAJ* 2002;166(5):592-5.

Ten years after publishing an article in *CMAJ*¹ about the negative implications of bicycle helmet legislation, I continue to be dumbfounded by the broad consensus within our profession in favour of such laws.²

A fundamental problem with emphasizing and legislating helmet use is that it reinforces the popular misconception that road bicycling is dangerous. The predictable result of such a message is decreased ridership, as Mary Chipman astutely warns.³ Thanks to superior cardiovascular fitness, the average cyclist outlives the average noncyclist, helmet or no helmet.⁴ Ultimately, helmet laws save a few brains but destroy many hearts.

Observations in several countries over the past 30 years have demonstrated how road cycling safety is consistently related to the numbers of riders.⁵ The converse is also true: individual risk rises as ridership declines, a pattern well

documented in the US over the past decade. As helmet laws there have become widespread, and as road cycling has become less popular, the rate of injury per active cyclist has risen by 50%.⁶

Fatal cyclist head injuries represent far less than 10% of all road-related deaths. Instead of fixating on protection for a small minority of road users, why don't physicians champion prevention of crashes and support measures that make roads safer for everyone? A priority should be to lower urban speed limits, especially on residential streets where traffic-calming devices should be standard. We should also support the elimination of all free parking, both public and commercial. By reducing both the speed and convenience of driving, we'd instantly witness dramatic declines in fatalities and everyone would benefit from model shifts to healthier, safer and more environmentally friendly forms of transport, such as walking, bicycling and public transit.

Thomas J. DeMarco
Physician
Whistler, BC

References

1. De Marco TJ. The use of bicycle helmets should not be mandatory [editorial]. *CMAJ* 1993;149(3):342-4.
2. LeBlanc JC, Beattie TL, Culligan C. Effect of legislation on the use of bicycle helmets. *CMAJ* 2002;166(5):592-5.

3. Chipman ML. Hats off (or not?) to helmet legislation [editorial]. *CMAJ* 2002;166(5):602.
4. Hillman M. *Cycling towards health and safety*. London: British Medical Association; 1992. p. 111-21.
5. Leden L, Garder P, Pulkkinen U. An expert judgement model applied to estimating the safety effect of a bicycle fatality. *Accid Anal Prev* 2000;32:589-99.
6. Barnes J. A bicycling mystery — head injuries piling up. Consumer Product Safety Commission Report. *New York Times* 2001 Jul 29.

The data presented by LeBlanc and colleagues¹ show that the risk of head injury per cyclist did not change as a result of the law, but rather the risk of other injuries approximately doubled. Their bicycle count data show a 40%–60% fall in the number of cyclists after the law was passed, from 88 per day down to 33 or 52 per day. Their injury data show a sharp fall in total injuries in 1997, but for 1998/99 the number of injuries was higher than before the law (443 v. 416). The absolute number of head injuries has fallen by half, but so has the number of cyclists, although the total number of injuries has increased. Likewise, the claim of a doubling in the rate of helmet use omits the more telling point that the absolute number of cyclists using helmets did not materially change.

The Nova Scotia helmet law experience strengthens the arguments against helmet laws. No reduction has occurred in the risk of head injury per cy-

Submitting letters

Letters may be submitted via our Web site or by mail, courier, email (pubs@cma.ca) or fax. They should be no more than 250 words long and must be signed by all authors. Letters written in response to an article published in *CMAJ* must be submitted within 2 months of the article's publication date. Letters are subject to editing and abridgement.

eLetters

We encourage readers to submit letters to the editor via the eLetters service on our Web site (www.cmaj.ca). Our aim is to post by the next business day correspondence that contributes significantly to the topic under discussion. eLetters will be appended to the article in question in *eCMAJ* and will also be considered for print publication in *CMAJ*. To send an eLetter, click on the "Submit a response to this article" at the top right-hand side of any *eCMAJ* article.