IN MEMORIAM

ASMUND S. LAERDAL

Born October 11, 1913. Died November 19, 1981.

Invitation to a memorial seminar and lunch

honoring our friend Asmund Laerdal,

innovator and patron of resuscitation developments worldwide.

Tuesday, December 8, 1981

12:00 - 1:00 p.m.

Resuscitation Research Center
University of Pittsburgh
3434 Fifth Avenue

By Peter Safar
University of Pittsburgh
November, 1981

ASMUND S. LAERDAL
Died November 19, 1981
in Stavanger, Norway

Asmund S. Laerdal was born in Norway on October 11, 1913. He went to business school, traveled throughout Europe by bicycle during his youth, and thought he would settle for creative work by getting married to Margit Magga in 1939 and by starting a small printing business in 1940. Nazi occupation betweeen 1941 and 1945 threatened his life but did not wreck his little company. Throughout the 1940s and 50s he printed childrens' books and calendars and made inexpensive wooden and plastic toys. The latter included the "toy of the year" which became the forerunner of "Resusci-Anne" manikin, namely "Anne Doll", made of soft plastic, with sleeping eyes and natural hair. After the war, he acquainted himself with the new technology of plastics and personally experimented with them. He also obtained collaboration of artists. During the 1960s he became known as an innovator of resuscitation equipment and training materials, and particularly as the Father of the Resusci-Anne CPR manikin. This was triggered by research in America on mouth-to-mouth breathing in the late 1950s, and the circumstances listed subsequently. In the 1970s, Asmund Laerdal also established himself as a leader beyond the creation and production of products, namely as an effective patron and catalyst for resuscitation developments worldwide.

His friends, colleagues and collaborators consider themselves fortunate to have known him, a truly great man, whose quiet, but determined manners, and eagerness to help, whenever he perceived a need, earned him much respect and love.

Funeral services were held in Stavanger on the day (Thursday, 11/26/81) when Americans celebrate Thanksgiving. We said thanks for what Asmund Laerdal has given the world and us as individuals.

We thank nature, his parents, his lifelong companion and wife, Magga, and his friends for having created and influenced this unique man. We thank fate for having protected him in war and illness until others were ready to carry on. His influence will be felt by his children, grandchildren and other relatives, and by his collaborators and friends.

He was a man of creative contrasts: his one side showed sensitivity, generosity, warmth, kindness, compassion, humility and tranquility. His other side showed stubborn determination (however, coupled with responsiveness to advice from people he respected), imagination, vision, tenacious hard work and frustration tolerance, which made him achieve results. He was in the true sense a self-made man with the vision and compassion of a saint. In this world of selfish greed, men like Asmund, who deliberately share their hard earned wealth, are rare. Of course, without being a good businessman, his other contributions would not have been possible.

My comments about Asmund Laerdal shall remind us of the immortality most human beings can obtain by becoming links in the chains of human development. He became a link in the chain of modern resuscitation, which started in the 1950s. Since then, resuscitation has become one of mankind's noblest efforts. Forgive me for dwelling on some of Asmund's historic contributions, first to resuscitation and training materials, then to CPR implementation, and finally to research and the future.

In the fall of 1958, Sten Florelius of the Norwegian Civil Defense, asked toymaker Asmund Laerdal to make a plastic mask for human volunteers, through which to practice mouth-to-mouth breathing. Asmund went to Stavanger's Anesthesiologist Bjorn Lind for advice on a full sized life-like manikin he wanted to make instead of the mask. Our data on the superiority of mouth-to-mouth had been published earlier this year, and were presented at the 8/58 Scandinavian Anesthesiologists' Meeting in Gausdal, which Lind attended. Lind suggested that Asmund visit me. Asmund had been motivated toward involvement in first-aid, through a near-tragedy in his family, and the fact that, in addition to toys, he made wound moulages.

A few months later, in 1959, Asmund Laerdal and Hans Dahll of New York. visited me at Baltimore City Hospitals, with a development model of a mouth-to-mouth manikin. We made suggestions, and were elated, since the U.S. Army had procrastinated on training manikin developments. Sculpturing proved difficult. The death mask of a Parisian girl, who drowned herself more than a century ago, was in Magga's parents' home. Her face became Resusci-Anne's. Asmund gave her this name since his previous dolls were called "Anne".

One year later, in December 1960, immediately after chest compressions for heart arrest were re-discovered in Baltimore, Asmund came for the second time to America. After meeting with the doctors who, in 1963, founded the American Heart Association CPR Committee, the Laerdal M-M manikin received a chestring, which upgraded it into a CPR training manikin. After 1961, when I moved to Pittsburgh, he visited us there.

In 1964, the Pittsburgh group added a recorder and pulse to Resusci-Annie, for education research. By 1970, Asmund's team had created and produced the recording manikin. When clinicians needed a better self-refilling bag-valve-mask unit, the Laerdal Company immediately developed one. Thereafter came numerous other creations and products, both improvements of existing tools and new concepts. The latter included Asmund's ingenious audio-visual self-training systems. His initiative and his Company's expertise with making books were behind the World Federation of Anesthesiologists' CPR books of 1968 and 1981.

Laerdal products came into being over the years through Asmund's unique responsiveness to needs, opportunities, research data, international recommendations, his leadership of the Company's teams, and his ability to understand doctors and researchers, and to teach them the technical and commercial possibilities and limitations. Without Laerdal products, CPR would never have been implemented as rapidly and broadly as it was, and would never have reached the lay public, the most important first link in the chain of life support. Laerdal products, however, were only the beginning, and remained the basis of your Company's contributions.

He and I philosophized much. We not only had mutual respect for each other, but also became close friends and kindred spirits, as we both felt we were "world citizens", had international perspectives, and were workaholics and activists -- although he and I had quite different training, expertise and styles of operation. For 22 years several times each year we discussed his design plans, some of my research ideas, and our mutual medico-political concerns and the activism needed for acute medicine.

When he perceived a need for international guidelines in resuscitation, he initiated and supported international resuscitation conferences (symposia) in Stavanger (1961) and Oslo (1967). He discreetly also supported the American Heart Association's standards meetings, and became a patron behind the scenes of numerous other important gatherings which affected the development of resuscitation worldwide.

For example, a Laerdal travel grant for Uppsala's Ake Grenvik, in 1967, to come for fellowship training to Pittsburgh, led to the growth of our CCM physician fellowship program into a worldwide specialty.

In the 1970s he gave advice on the Club of Mainz on Emergency and Disaster Medicine Worldwide. This, and Asmund's participation in international congresses, focused his interests increasingly on mass casualties, disaster preparedness, developing countries, public education and the inefficiency of existing relief agencies.

The life blood of progress is research. This he also learned to appreciate. I remember a meeting in Prague in 1965 when we had a long talk on the need for systematic research in resuscitation. He acted on this and recently created a research Foundation. At Guidelines Symposia he looked for data. In 1970 a Laerdal travel grant helped Dr. Bjorn Lind to spend a sabbatical year with us in Pittsburgh. Lind's studies were the first of a research program which initiated the concept of brain resuscitation after cardiac arrest. This concept in recent years has sparked a flurry of interest worldwide, and thereby a focusing of resuscitation on the brain, the organ which makes us human beings.

In 1978, the Resuscitation Research Center of the University of Pittsburgh, the only one of its kind in the Western World, could not have been started without Laerdal's help and advice. He not only appreciated the importance of laboratory and clinical research, but also the need to quantitate the results of education materials and programs and of resuscitation services. He realized that merely proclaiming that CPR "saves thousands of lives" is not enough, and that we need documentation and evaluation of quality of outcome. He appreciated both imaginative thinking, as well as a search for the truth. Finally, he helped financially and, as a contributing innovator, to initiate the Wolf Creek Club meetings of CPR researchers of 1975 and 1980.

Asmund Laerdal's contributions for mankind are being increasingly honored by the medical profession and by society at large. He was the first non-medical member of the Society of Critical Care Medicine, and the Wolf Creek Club; and honorary member of the Club of Mainz. It is good that he personally could still enjoy, in his last year, the honors conferred by the American Heart Association, University of Pittsburgh and Scandanavian Society of Anesthesiologists. There should be other awards posthumously which by honoring him should encourage us to continue the struggle.

Even during the last months of his life, his thoughts were not for himself. His vision gave us several messages, including the following five:

(1) For patient care, the needed quality and further innovations of Laerdal Company products, he said, will depend on collaboration of all the members of the plant. I know that he always had each member of the team in mind.

(2) For education, he wants us to stress simplicity, realism and reaching the masses. For example, he instinctively turned away from sophisticated, expensive technology and commercialism. Recent events proved him right.

(3) For implementation, he wants us to do more for underdeveloped countries and for peace. However, he also wants us to be prepared for the worst. I, optimistically, believe that his prediction of World War III will be the first one in which history will prove him wrong.

His global message on implementing care was read by Tore at the Pittsburgh Congress in June 1981. This was Asmund's last publication. It will appear in Disaster Medicine of 1982, together with the other papers of the panel on education, which will be dedicated to him. He also recently urged that someone study and publish the problems and necessary improvements in the work of international medical and emergency relief agencies, particularly those working for underdeveloped countries. All this goes far beyond resuscitation.

(4) For research, he recommends that we give priority to seeking solutions to current, important patient care problems. He left behind a research foundation, and also valuable suggestions for secure long-range funding of resuscitation related research in general.

(5) Last but not least, he provided for continuity. He wisely turned the leadership of his Company and further pursuit of his visions over to his extremely capable son Tore, without tying his hands. Fortunate is the man who dies only after he has secured the next link in the chain. Change is a necessary component of life and progress. Tore will and should use his own personality, imagination and style. As a wise young man, however, he will never be reluctant to learn from history, including that made by his father. Those who carry on should not be frightened to step into Asmund's big shoes, but rather gain strength from his successes, to overcome obstacles to their own efforts.

Behind every successful man there is a great woman. Without Magga's ability to keep the home front under control and to help Asmund's programs as a gracious hostess, he may have not come as far as he did in his worldwide impact. Next in importance, as catalysts, were his competent, creative, loyal associates like Hans Dahll, Harald Eikeland, Tore Laerdal, and the many other co-leaders of his Company.

Asmund's other son Age will carry on Asmund's ideals as a physician. Asmund's two sons, his wife, their daughter, Astrid and her husband, Dr. Olav Froseth, his grandchildren, and the many others whose lives he touched, including me, my wife, Eva, my children and my friends who became his friends, all will try to carry on his spiritual legacy.

Millions have been influenced by Laerdal's products, thousands by his thoughts, but only a privileged few of us by the twinkle in his piercing, loving blue eyes.

Asmund S. Laerdal
10/11/13 - 11/19/81

TO ASMUND

from Peter

Thoughtful friend, from across the sea,
Your body no longer feels pain,
Yet some of it lingers deep within me,
For I'll never see you again.

I'll miss your laugh, your twinkling eyes,
The talks that often we had.
Your soul and body have now found peace
Forgive me, for feeling sad.

For there's anger within and confusion, too,
Why such a kind man must die.
So many with seemingly less value here
Still live, and I can't explain why.

Some might say not to question why,
But I've never feared questioning thought,
And I'll always wonder why it was so
Whether I learn the answer or not.

Man's body may lie in a cold, dark, grave,
And it seems as if he's gone.
But the lives Asmund touched in this troubled world
Will see his work carried on.

We are all links in chains, some strong, some weak.
What counts is the overall plan.
Just how we lived our life on earth
And treated our fellow man.

For some death comes as an enemy,
To others a welcome friend,
The love Asmund gave to all he knew
Means his life will never end.

by Nancy Kirimli
Pittsburgh, USA
November, 1981