



BMJ focuses on uncertainties about helmets

Do enforced bicycle helmet laws improve public health?

In the 24th March 2006 issue of the British Medical Journal (BMJ), Australian statistician Dorothy Robinson argues that there is no evidence from countries that have enforced the wearing of cycle helmets that there has been any benefit to public health (Robinson, 2006).

Robinson reviewed data before and after helmet legislation in Australia, New Zealand and Canada and believes helmet laws discourage cycling and produce no obvious response in the number of head injuries. She says: "This contradiction may be due to risk compensation, incorrect helmet wearing, reduced safety in numbers (injury rates per cyclist are lower when more people cycle), or bias in case control studies."

She suggests that helmet laws are counterproductive and that governments should instead focus on measures that lead to clear drops in casualties, such as campaigns to against speeding, drink-driving, and failure to obey road rules. "Helmet laws would be counter productive if they discouraged cycling and increased car use," says Robinson. "Wearing helmets may also encourage cyclists to take more risks, or motorists to take less care when they encounter cyclists."

[Read the full article here](#)

Arguments against helmet legislation flawed

Four pro-compulsion medical academics, who between them have penned some of the most controversial helmet studies, contest Robinson's conclusions in a separate article in BMJ (Hagel, Macpherson, Rivara and Pless, 2006). Assistant professor Brent Hagel of Montreal Children's Hospital Research Institute, and colleagues, say: "Robinson's opposition to helmet laws is contrary to published evidence on the effectiveness of bicycle helmets. At least six independent studies have reported a protective association between wearing bicycle helmets and head injuries."

However, the authors appear to agree that helmet compulsion leads to a drop in cycle usage and suggest that falls in cycle use are acceptable in order to reduce risk, as they claim, to those who continue to cycle.

[Read the full counter-article here](#)

Rapid responses

BMJ publishes 'rapid responses' from readers to its articles and these papers have attracted a lot of interest.

Look here for the latest responses submitted:

[Rapid responses - General debate](#)

[Rapid responses to Robinson article](#)

[Rapid responses to counter-article](#)

References

Hagel, Macpherson, Rivara and Pless, 2006

Hagel B, Macpherson A, Rivara FP, Pless B, 2006. [Arguments against helmet legislation are flawed](#). BMJ BMJ 2006;332:725-726. **External Link**

<http://bmj.bmjournals.com/cgi/content/full/332/7543/725>

Robinson, 2006



Robinson DL, 2006. [Do enforced bicycle helmet laws improve public health?](#) BMJ 2006;332:722-725.

<http://www.cyclehelmets.org/1146.html>

The Bicycle Helmet Research Foundation (BHRF), an incorporated body with an international membership, exists to undertake, encourage and spread the scientific study of the use of bicycle helmets. Also to consider the effect of the promotion and use of helmets on the perception of cycling in terms of risk and the achievement of wider public health and societal goals.

BHRF strives to provide a resource of best-available factual information to assist the understanding of a complex subject, and one where some of the reasoning may conflict with received opinion. In particular BHRF seeks to provide access to a wider range of information than is commonly made available by those that take a strong helmet promotion stance. It is hoped that this will assist informed judgements about the pros and cons of cycle helmets.

For more information, please visit www.cyclehelmets.org.

Document downloaded 17 Jul 2018. The copyright in this document is owned by the Bicycle Helmet Research Foundation, but it may be reproduced or distributed freely so long as the content is not modified in any way.