

# Heart Attack and the Medical Certificate

Sure you can get back  
on flying status—but it  
is no mere formality



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■ ■ When I awoke in the intensive care ward at the Florida Hospital here in Orlando in June 1969, after a "myocardial infarction" (acute coronary thrombosis), there were two thoughts on my mind. I played tennis regularly and wanted to get back on the court as soon as possible to keep my physical tone. Also, my medical certificate was now invalid, but I wanted to keep flying.

Several weeks later, I was back home convalescing, walking vigorously, and repairing the lawn sprinklers. I completed my uneventful recovery at nearby Cocoa Beach, within sight of the space

complex at Cape Canaveral.

In a few months, I was playing tennis again. I had planned only to exercise moderately, but found I could play singles without stress or fatigue. In due course, I was playing three sets of singles a day, often in about 90-degree temperatures.

It may seem childish for a then 55-year-old man to find encouragement in a gift book to go after his FAA medical certificate again. It was the classic, *The Little Prince*, by Antoine de Saint Exupéry, sent to me while in the hospital. It was the story of a pilot, stranded

in the Sahara Desert after a forced landing, who meets a young prince from "Asteroid B-612." The charming visitor from outer space had the naiveté to suggest to the flyer that whatever he felt he could do, he could do. He also declared what was particularly ironic to me: "It is only with the heart that one can see rightly."

Sometimes at the hospital, in the night when I awoke tired of resting, I would think about the golden-haired little prince. It diverted my mind from the worrisome silence in the darkness or the sudden panic-breathing in a



nearby room and the hurried steps of a nurse or resident down the corridor.

It seemed the little prince was sitting in the tree outside my window chuckling and whispering encouragement to me. He knew I was concerned about the new condition I found myself in—a man who had never been a hospital patient before. I thought I heard him say, "I checked your case and spoke to my pilot friend about you. He says you should be able to get your medical certificate restored."

But it wasn't to be simple. It took a little over five years from the time of the heart attack.

With the encouragement of the little prince and several local doctors, I'm back flying—now five years older—with my new medical certificate. I feel like one of the grounded astronauts who was restored to flight status. When I phoned my local attorney about it, his reaction was, "Congratulations, you beat City Hall!"

I tell this personal story because it may encourage others to get their own medical certificates restored or to overcome other problems with local, state or federal agencies.

In aviation, the law is very specific. If you have a heart attack, your medical certificate is automatically invalid. You can no longer pilot an aircraft, even if you have a pilot's license approved by the Federal Aviation Administration.

However, the Federal Air Surgeon is permitted to grant exemptions when that office is satisfied the applicant's physical condition has improved to "permit the safe performance of airman's duties. . ." The problem is getting that exemption.

First, I learned that the FAA wouldn't consider such an application until two years after the heart attack. So the initial try I made when I felt physically ready was wasted energy.

If you are denied an exemption by the Air Surgeon, you may appeal the denial. I sought legal advice about appealing from attorneys who represented me on other matters in Washington. I soon learned that an appeal was also wasted motion unless that challenge was based upon a misjudgment, error or misinterpretation of a medical report or the law by the FAA staff.

The fact is the regulations state that if you have had a heart attack, you cannot fly. Only the Air Surgeon can grant an exemption after reviewing extensive physical examinations and your medical history in consultation with a board of medical men. He must feel satisfied that you can perform an airman's duties safely.

It took many physical examinations and differences of medical opinion during the first several years to get me several denials "without prejudice" so I could continue to reapply.

Now it wasn't that I was a flying fanatic; nor was flying necessary for my occupation; nor was it even a major avocation. But I really felt I was qualified physically to fly safely. I felt frustrated by the law and regulations that

grounded me as if I were an invalid—no matter how reasonable the regulations.

I might have stopped right at the beginning, but I was encouraged by several local doctors. One was my personal physician. Another was a local authorized air examiner who was the first and only air examiner I used after I moved to Florida in 1960. The third doctor, also a local air examiner, saw me regularly at the tennis court and sometimes even played singles with me. The latter was particularly adamant and insisted that I should pursue the application. He saw me chase after cross-court shots and soft lobs like a rejuvenated Bobby Riggs.

My mother, business associates, attorneys would just as soon have seen me grounded. They considered my avocational ambitions unimportant or trivial. On a trip to Washington, I once spoke to an FAA official about my case, trying to find out if I even had a chance for renewal of my medical certificate. He told me that the FAA's experience in granting exemptions had not been too encouraging.

It dawned upon me later that pilots with valid medical certificates, like other humans, die unexpectedly at all ages from various illnesses. The airman's medical certificate is no lifetime guarantee of continuing good health. On the other hand, I suppose, statistically, I was a greater risk.

My wife tyrannized my diet. On business trips, I was on the honor system and ate moderately. I played tennis almost daily and swam regularly. (Jogging and similar exercises bore me.)

Friends cautioned me about any exercise—but not my personal doctors or medical acquaintances. I observed that some doctors do frighten their heart patients into excessive caution. Their patients are even afraid to return to work too soon.

Treatment has changed in recent years. Some heart patients are now encouraged during and after recuperation to exercise, under controlled conditions, of course.

My regular medical checkups after I went back to my routine were favorable: blood pressure "like a boy's" Electrocardiogram tests in tennis clothes on the slanting treadmill even under extreme stress conditions were favorable. The much younger cardiologist who supervised the treadmill test said he wished he were in such good physical condition, which was reassuring.

My medical reports, x-rays and wavy-lined EKG reports went to the FAA several times. For the last try, I did contact AOPA. They encouraged me and helped straighten out some of the paper work and followed through to make certain that the FAA had all the material they needed to review the tests promptly.

I pretty much had made up my mind in 1975, that this would be the last extra effort.

On September 3, 1975, the "Grant of Exemption" was issued. It said: "The



# Is It Worth Trying?

The number of pilots who lose their medical certificates due to heart problems can't be counted. More than likely, the pilot who suffers a heart problem will simply let his medical certificate expire, and the FAA does not seek, or require, that a cause for an expiration be given.

In 1974 however, the FAA's Office of Aviation Medicine (appeals branch, aeromedical standards division) received a total of 662 petitions for exemptions from medical requirements in the aviation regulations. In that year, 214 exemptions were

granted and 448 were denied. A significant number of the denials, 115, resulted from the petitioner's failure to furnish medical information requested by the FAA (most likely, said appeals branch chief Dr. Walter Condon, because of the expense involved). These 115 cases were never classified in a medical category, but "the bulk of them," said Condon, were heart-related.

In the cardio-vascular area specifically, the appeals branch denied 200 petitions, but granted 117 during 1974. Dr. Condon noted that most of these cases revolved around myocardial infarctions (heart attacks), but the numbers also include other cardio-vascular problems.

Based, then, on the 1974 numbers, if you go through the *complete* appeals process—the waiting period, the paperwork, and the batteries of medical tests that the FAA will require—you have about a 58% chance of being FAA-approved for flight once again following recovery from your heart problem.

## HEART ATTACK *continued*

medical evidence submitted by petitioner shows the presence of a condition which by its nature and degree, would permit the safe performance of airman's duties under conditions set forth herein. In light of the specific situation involved, I therefore find that the grant of the requested exemption would be in the public interest . . . and a third class medical certificate shall be issued to him . . ."

Every six months, I do have to furnish the FAA with a completely new cardiovascular examination as outlined in the specifications sheet. Also, there must be oxygen immediately available in the aircraft at all times and must be used "when flying at altitudes of 8,000 feet or more or a cabin pressure equivalent thereto."

Because of this oxygen requirement I now carry a safety unit, in my case an Aviox single pack, manufactured by Scott ATO of Lancaster, New York. It weighs about four pounds complete with a face mask in the cover assembly. When I go flying, the unit fits easily into my old VIP case which also can hold my leather portfolio containing my log, maps and flying aids. I stuck my AOPA decal on the top lid of the old case to prevent confusing it with my regular business case.

Returning to flying was subconsciously

a nervous experience in the beginning. I started with a refresher course and the biennial recertification. Now I've slipped into preparations for an instrument flight rating.

The initial nervousness was evident in my crude landings and roller coaster flight patterns in the sky. At first, it was difficult to hold course and altitude. I knew better but over-reacted like a new student pilot. The only difference was that I had a pretty good idea of what I was doing wrong. I just wasn't putting the package together easily. I was overanxious to get back into the groove. It wasn't a question of the old dog learning new tricks as much as reminding the old dog of old tricks.

There have been some changes in flying techniques since I had last taken serious instruction. The use of the yoke for altitude rather than the throttle was an interesting variation and made sense. (I've already had an argument with a pilot over this. He says that's the way it always should have been done.)

Another change is where I used to leave the pattern at the second turn. Most airport accidents occurred there. Now I avoid that critical corner for departure.

Instructors these days seem, in general, more competent; answering questions or teaching not as a matter of personal idiosyncrasy and sometimes even furnishing me a copy of a flight instructor's information sheet.

This old bird has been leaving his nest, flying solo around central Florida, making touch-and-go landings wherever he sees a runway. I feel confident using the omni and am rather reassured by the transponder, knowing it informs departure and approach control and tower where I am in the sky. This safety luxury was unknown to me before my enforced medical leave. As my wings get stronger, I'll fly further away as long as I can keep getting those medical exemptions renewed every six months.

I discussed this six-month requirement for physicals with my pilot-son. I wondered if the time period would be stretched out later. He doubted that would ever happen but offered me this consolation: "Think of yourself as an airline pilot, Dad. They take physicals every six months, too."

Several years ago, I visited the Pantheon in Paris. Great Frenchmen are honored in this national monument and temple. I discovered on a marble pillar the name of the author of *The Little Prince* and this testimonial to him:

"To the memory of Antoine de Saint-Exupery, Poet, Novelist, Aviator, who disappeared during an aerial reconnaissance mission, 31 July 1944."

Wherever Saint-Exupery is in the skyways and wherever I am, I know nearby somewhere, like a flight controller, is the smiling little prince with his eternal and exquisite optimism reassuring both of us that everything will be all right. □

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