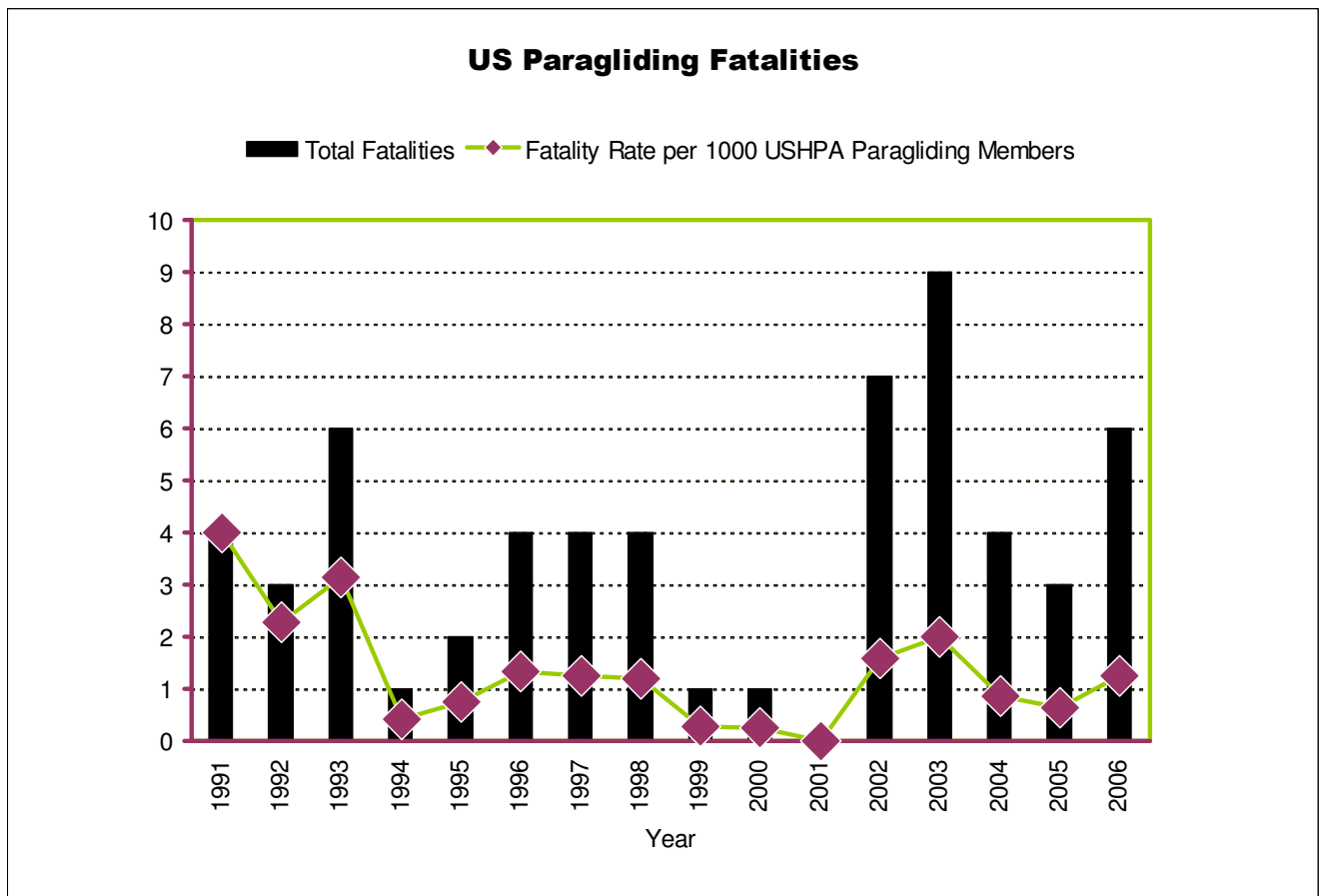


## 2006 Paragliding Accidents

Mike Steed

If you are a typical American, you will die of heart disease – brought down by sedentary living and cheeseburgers. Death by cancer is almost as likely. Death by either of these diseases is over five times more likely than accidental death by all causes. Yet we tend not to worry about diseases, much less change our behavior to reduce the risks. Accidental death gets more of our attention, perhaps because it is a sudden individual event that can focus our worries.

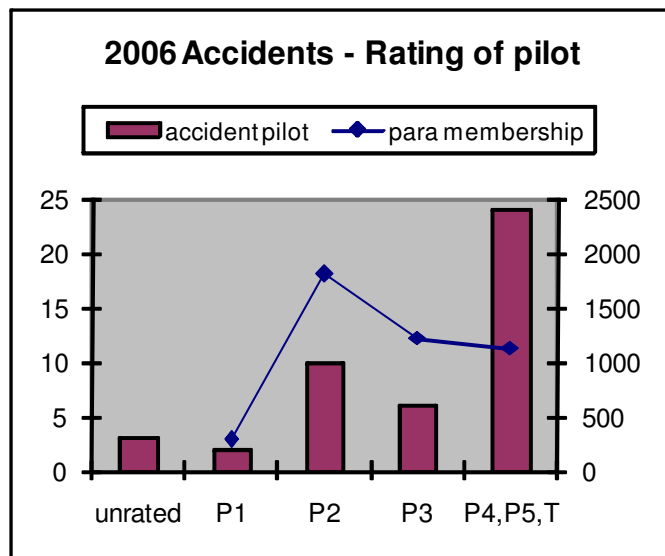
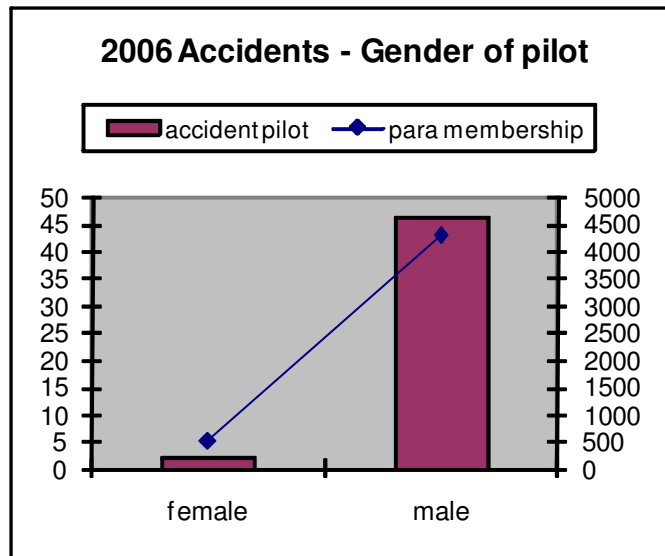
Almost half of accidental deaths occur in cars or on motorcycles. Near the bottom of the accidental death list, far below bee stings, lightning strikes, and dog attacks, you would find our sport, assuming the statistics included such a category. In 2003, there were 22 deaths in commercial airline accidents, 22 attributed to skydiving, and 22 by human stampede. Few if any of the people in commercial airline crashes had direct control over their destiny, unlike those who were skydiving – it is said that every skydiver is dead when they jump, and they have only minutes to save their own life. Our sport is more similar to skydiving than commercial airline travel; we have control of our own destiny and should have the necessary training and equipment to safeguard our own life. (Data above from CDC and NTSB sources as reported in Time magazine 12/4/2006.)



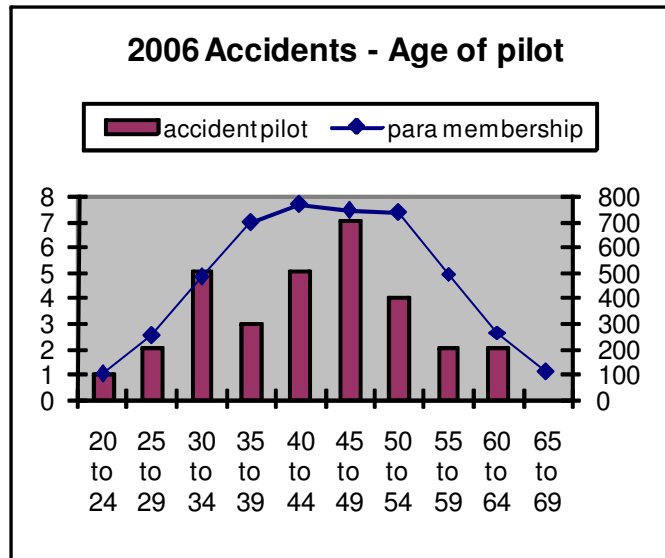
There were six unpowered paragliding fatalities in the US during 2006. This is almost twice the running average, but two years have been higher. 2006 would have been a very typical year, were it not for a tandem double-fatality – tandem accidents were rare in past years. All these were witnessed, and each fatality has been described in earlier articles, so I won't go into detail here. They include a towing mishap (a beginner in a non-USHPA paramotoring class), a power line electrocution and subsequent impact with terrain, two uncontrolled spiral dives, and the tandem appears to have launched in a partially-connected state. We in the accident review group are fairly certain we hear about all fatalities, even though only half were reported on the USHPA online system. We cannot say the same about non-fatal accidents, which are clearly under-reported. So as you read the summary, keep in mind that this is an incomplete and possibly distorted picture. Also keep in mind that every member should report accidents so as to improve our data. Multiple reports of the same accident are welcome and sometimes each adds different insights.

49 unique US accidents are included in the statistics this year, including the fatalities. We include foreign visitors and non-members, but not accidents outside the US. This is about the same as 2005, but half of the 2003 peak. They include just about every category of pilot experience, pilot age, and a broad range of causes and outcomes. There was one obvious equipment mismatch – a pilot experienced on fixed and hang wings took up paragliding and got a great deal on a used DHV 2-3 wing. He had a large asymmetric collapse and “spun twice” (probably spiraled) 300 feet to the ground. After spending almost 3 months in the hospital he has since gotten instruction and a new DHV 1-2 wing. Otherwise, there were no P1 pilots on DHV 2 wings, and the other pilot on DHV 2-3 and two on comp wings were P4s.

Comparing to the demographics of USHPA paragliding pilots overall, you see that women, already under-represented, were even less represented in the accidents. Pilots with P2 and P3 ratings were under-represented and P4-and-up ratings were over-represented. The high-rated pilots include some who are full-time pilots and some who fly in the most demanding conditions, so their higher accident rate may not be surprising. But maybe we should focus less on “intermediate syndrome” and discuss “advanced syndrome” instead?

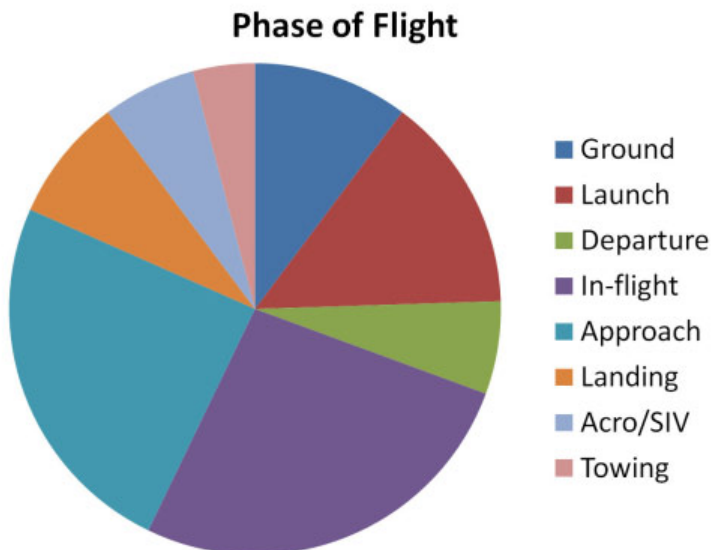


Similar events can have very different outcomes – another tandem clip-in failure involved the passenger instead of the pilot and they landed safely thanks to holding the passenger between the legs and getting the passenger hoisted up to where he could grab and support his own weight on the riser of the disconnected side. Luck often played a big part in the extent of injury, and landing in blackberries was considered either bad luck or very good luck, depending on the rate of descent and amount of clothing. Several injuries involved pilots who were flying or kiting at or above the weight range of the wing.



Tree landings were generally friendly, though one injury happened while climbing down from an unsecured harness as the slender branch supporting everything gave way. Reserve parachute deployments were evenly divided between injury, no injury, and thrown too late, with one of the spiral fatalities in the latter category.

Injuries ranged from very serious (multiple vertebra fractures plus leg amputation) to none. In addition to the 6 fatalities, 11 were serious enough for at least one night in the hospital. Injuries to the lower extremities were most common, followed by arms/shoulders, then trunk injuries including spinal. Injuries to the head/neck/face were least common, but several pilots thanked their helmet for preventing injury and often had helmet damage to prove it. One got dragged and knocked unconscious, later requiring nose stitches despite a full-face helmet. There were collisions with parked vehicles on misjudged landing turns and while kiting or launching in high wind. Vehicles tended to suffer more damage than the pilot, except when legs went through the glass and got dragged out again – yikes!



An unusually-high 10% of accidents happened while kiting or were attributed to some problem prior to launch. These problems were not necessarily serious – line tangles, turned the wrong way after a reverse inflation, launched despite attempting to abort – but they got the pilot flustered and started a sequence of events that ended badly. As usual, in-flight and approach problems were most frequent and account for about a quarter of accidents each.

Approach problems were often failure to properly account for wind. In-flight problems ranged from acro-gone-bad to structural failure in nasty air – here altitude is your friend and the outcome often depends on how much altitude is available to recover.

That is enough about 2006. I hope you have learned something you can put to use. And don't forget to go easy on the cheeseburgers....