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## Pilot incapacitation, Boeing 757-236, G-BIKL, 27 April 1998 at 0710 hrs

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**Micro-summary:** The captain of this Boeing 757-236 was incapacitated with chest pains.

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**Event Date:** 1998-04-27 at 0710 UTC

**Investigative Body:** Aircraft Accident Investigation Board (AAIB), United Kingdom

**Investigative Body's Web Site:** <http://www.aaib.dft.gov/uk/>

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# Boeing 757-236, G-BIKL, 27 April 1998 at 0710 hrs

**AAIB Bulletin No: 8/98 Ref: EW/G98/04/16      Category: 1.1**

## INCIDENT

**Aircraft Type and Registration:** Boeing 757-236, G-BIKL  
**No & Type of Engines:** 2 Rolls Royce RB211-535C-37 turbofan engines  
**Year of Manufacture:** 1983  
**Date & Time (UTC):** 27 April 1998 at 0710 hrs  
**Location:** London Heathrow Airport  
**Type of Flight:** Public Transport  
**Persons on Board:** Crew - 7 - Passengers - 145  
**Injuries:** Crew - None - Passengers - None  
**Nature of Damage:** None  
**Commander's Licence:** Airline Transport Pilot's Licence  
**Commander's Age:** 52 years  
**Commander's Flying Experience:** 12,995 hours (of which 3,478 were on type)  
Last 90 days - 110 hours  
Last 28 days - 65 hours  
**Information Source:** Aircraft Accident Report Form submitted by the pilot

The flight had departed from Aberdeen for London Heathrow when, during the cruise, the commander reported to the first officer that he was feeling unwell with accompanying chest pains. The first officer was occupying the left hand seat undergoing command training. The flight crew decided to declare an emergency, specifying a medical problem, in order to minimise the flight time and avoid the 20 minute delay which had been expected. An uneventful ILS approach and auto-landing was completed. The commander, who remained conscious and functional throughout, flew the approach as handling pilot in accordance with standard operating procedures. After landing he was taken to hospital and later treated successfully for angina.

His previous medical examination, including an electrocardiogram (ECG), had been conducted on 1 April 1998 when a Class One certificate was issued. The Medical Branch of the CAA Safety Regulation Group advise that 'Angina pectoris is the name for a symptom which commonly presents as chest tightness or pain. It is usually caused by one or more narrowed coronary arteries which in turn results in a reduced blood supply to the heart muscle. This may be detected prior to the first symptoms by means of a resting ECG, but this is not always the case.'