New CPR technique simplifies saving lives

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OTTAWA— According to the Heart and Stroke Foundation of Canada (HSFC), chest compressions alone, or hands-only cardiopulmonary resuscitation (CPR), can save lives and can be used to help an adult who suddenly collapses.

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More than 80 per cent of cardiac arrests happen at home or in public places—and less than five per cent of these victims survive. Research shows that 35 to 55 per cent of out-of-hospital arrests are witnessed by a bystander, often a family member or friend, but very few victims receive CPR. Just calling 9-1-1 and push-

ing hard, repeatedly, on the victim's chest until help arrives will go a long way to helping the person survive.

The emphasis on hands-only CPR as an option for responding to a witnessed adult arrest is supported by evidence published from three separate large studies in 2007, each describing the outcomes of hundreds of instances of bystanders performing CPR on cardiac arrest victims. None of those studies demonstrated a negative impact on survival when ventilations were omitted from the bystanders' actions.

The Foundation still encourages the public to obtain conventional CPR training, which includes the skills needed to perform Hands-Only CPR, as well as the additional skills needed to care for a wide range of cardiovascular- and respiratory-related medical emergencies, especially for infants and children.

"We understand that there are lots of reasons why people find it challenging to learn CPR, including a lack of time, which is why we've introduced new training products to Canada, like CPR Anytime, a 22-minute video instruction for individuals," says Stephen Samis, HSFC director of health policy.

More information on CPR training can be found at **www.heartandstroke.ca.** Information on the Foundation's CPR Anytime training kit can be found at **www.cpranytime.ca**.

The Heart and Stroke Foundation (**www.heartandstroke.ca**), a volunteer-based health charity, leads in eliminating heart disease and stroke and reducing their impact through the advancement of research and its application, the promotion of healthy living, and advocacy.

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Hands-only CPR is a potentially lifesaving option that can be used by people not trained in conventional CPR, or those who are unsure of their ability to give the combination of chest compressions and mouth-to-mouth breathing required.

The HSFC today supported a new American Heart Association

scientific statement published in Circulation: Journal of the

There are some caveats, however, about when and where to use this new technique, according to the Foundation. "The new recommendations apply only to bystanders who witness an adult cardiac arrest outside a hospital setting," notes Dr. Allan de Caen, chair of the HSFC Policy Advisory Committee on Resuscitation. "Conventional CPR is still an important skill to learn, and medical personnel should still perform conventional CPR in the course of their professional duties."

Hands-only CPR should also **not** be used for infants or children, for adults whose cardiac arrest is from respiratory causes (like drug overdose or near-drowning), or for an unwitnessed cardiac arrest. In those cases, the victim would benefit most from the combination of both chest compressions and breaths in conventional CPR.

"Clearly the best option is for all Canadians to be trained in all the steps of CPR, so they are prepared for any emergency," says Dr. de Caen. "But the science is pointing to good results with this simplified technique, and if it helps us improve the rates of bystander CPR and, therefore, the chances of survival after cardiac arrest, that would be a tremendous advance."

According to the Foundation, members of the public who witness the sudden collapse of an adult, but who are not able or willing to perform rescue breathing should immediately call 9-1-1 and start what is called Hands-Only CPR. This involves providing high-quality chest compressions by pushing hard and fast, at a rate of about 100 times per minute, in the middle of the victim's chest, without stopping, until emergency medical services (EMS) responders arrive.