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Media Release

RUH Consultant: ‘Length of resuscitation attempts should be decided on case-by-case basis’

AN RUH Consultant, who sits on the Resuscitation Council’s Executive Committee, says there isn’t enough evidence to recommend how long resuscitation attempts on patients who have suffered an in-hospital cardiac arrest should last.

Writing in *The Lancet* this week, Dr Jerry Nolan says the amount of time should instead be determined on a case-by-case basis.

Dr Nolan, a Consultant Anaesthetist, was also interviewed on BBC Radio 4’s Today programme about his comment piece in the medical journal this week about a study of patients who had suffered cardiac arrests in American hospitals.

The study suggests hospitals that carried on attempts at cardiopulmonary resuscitation (CPR) for longer had the highest survival rates for patients who had suffered a cardiac arrest.

While CPR guidelines in the UK are standardised, recommendations on when to stop resuscitation attempts in a hospital are less precise, meaning that resuscitation teams have to make subjective decisions.

Dr Nolan says: “The study suggests that there may be a few more survivors if CPR is carried out for a little bit longer. But we cannot set a minimum time for how long resuscitation should be attempted, and it depends very much on individual circumstances.

“At the RUH we are doing everything we possibly can to improve the care we provide for patients who have suffered a cardiac arrest, and we are collecting as much data on these patients as we can and entering it into the National Cardiac Arrest Audit (NCAA). Data derived from NCAA may be used to decrease variability between hospitals and to improve overall patient outcomes.

“Duration of resuscitation attempts should be established on a case-by-case basis and take into account other known determinants of survival. Prolonged resuscitation efforts can result in high-quality survival. If the cause of cardiac arrest is potentially reversible, it might be worthwhile to try for a little longer.”

Notes to Editors

Researchers used data from a registry of cardiac arrests in hospital from the American Heart Association to compare the length of resuscitation efforts and survival for 64,339 patients with cardiac arrests at 435 U.S. hospitals between 2000 and 2008.

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