Doctor who invented lifesaving technique warns against Red Cross method

Beware th

Back Slap

If You're

loking

Dr. Henry Heimlich demonstrates his method on Gov. Edward King in Boston.

By Jean Carper

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A BOUT A YEAR and a half ago I nearly died in the main dining room of the Sheraton-Carlton Hotel.

I was eating a salad from the buffet when apiece of tomato slid down my throat with astonishing ease and stuck there. I could not breathe or utter a sound because my windpipe was totally blocked. All I could think of was: Only four minutes until brain damage.

I stood up and in the confusing seconds that followed signaled my two companions to call a waiter. My thought was he would get help — perhaps a doctor who could perform an emergency tracheotomy.

Instead, the waiter ran over, wrapped his arms around me from behind, put his fist into my abdomen just below my rib cage and gave a quick upward thrust that lifted me slightly off the floor. He did it again and the piece of tomato flew out of my mouth, landing on the floor a good six feet away. I looked at it with amazement, some embarrassment and overwhelming relief that it had not been my fate, after all, to die in the Sheraton-Carlton that day because, as I discovered later, the management had trained all its waiters in the "Heimlich maneuver."

Jean Carper, a Washington writer, is coauthor of "Eating May Be Hazardous. to Your Health." That set me off on a mission to find out why. all waiters and waitresses are not trained in this maneuver. And that is how I stumbled into the middle of a medical feud between Dr. Henry Heimlich, the Cincinnati throat surgeon who originated the technique, and the American Red Cross.

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Dr. Heimlich, well known in the medical community for innovations in chest surgery, had long been concerned about the number of choking fatalities and theorized that a sudden burst of air pressure up through the esophagus should expel an obstruction. He tested his theory on beagles in 1973 and found it worked. Almost immediately, Heimlich took his technique to the Red Cross, suggesting they use it cautiously at first to be sure it worked on humans.

The Red Cross, however, has not adopted and does not teach the Heimlich technique, even though the maneuver has now saved thousands of people — Dr. Heimlich personally knows of about 3,000 — and is endorsed by many public health officials and physicians. Instead, the Red Cross teaches a bastardized version of the maneuver which Dr. Heimlich charges is injuring and killing people instead of saving them. Dr. Heimlich has even forbidden the Red Cross to use his name in its materials. Consequently, the Red Cross calls its technique "the abdominal thrust."



the youngster was dead. A restaurateur in Il-timois says he was almost saved by the Heim-lich maneuver when someone came up and slapped him on the back, forcing the food

says he knows of six), notably when food is was performed, was unable to do any good. Dr. Heinlich notes that in rare cases the

However, C. P. Dail, head of the Red Cross' national first-nid program, also re-ferred me to the NAS committee report for "the evidence" on back slapping. I always

Just the Heimlich maneuver, please. buck-passing when lives are at stake. In the meantime, if I'm ever choking again I'd. prefer my rescuer to foregy the back slap.

Obstructed Airway Seen As Most Effective

The American Red Cross is beginning to respond to charges by Dr. Henry J. Heimlich that the widely approved technique for the relief of an obstructed airway, taught by the American Red Cross and American Heart Association, is unsafe and unfounded.

In recent weeks, Dr. Heimlich has been on national television and has sent letters to a number of organizations that utilize Red Cross instructional materials explaining his choking relief method. In his letters he attacked the relief procedures contained in the Red Cross materials and said the Red Cross stands alone in endorsing its method. All of this has tended to confuse the public about proper first aid procedures.

The Red Cross takes the position that the procedures taught in its courses are those recommended by the National Academy of Sciences/National Research Council (NAS/NRC), based on a 1976 report by an Ad Hoc committee of recognized medical experts assembled by SUPPORT RED CROSS NAS/NRC. This report was subsequently reviewed by a group other than the authors, according to NAS procedures. (The Ad Hoc committee is currently evaluating all Red Cross first aid procedures and any new evidence related to choking emergencies will be studied during this process.)

In addition, the American Medical Association's first aid guide, as well as all three texts approved for teaching the Emergency Medical Technician course (Brady, AAOS, Ohio), advocate and teach the Red CRoss/Heart Association method of back blows, abdominal thrusts, and finger probe.

The American Heart Association (AHA) has conducted a two-year survey on airway obstruction "saves" that used any method, compiling several hundred cases from all over the country.

A December 22, 1978, statement by the AHA's Subcommittee on Emergency Cardiac Care said the preliminary analysis indicated that "all recommended procedures including back blows have been found to be successful and effective in removing airway obstruction in a significant percentage of cases." It also indicated that the data further supports the recommendations of the 1976 Emergency Airway Management Conference.

AHA continued, "There is no documentation of any claim that back blows properly applied have aggravated airway obstruction or caused injury." A report covering an indepth analysis of the data will be published by AHA this spring.

In an effort to better educate the public, the Red Cross has recently produced some television spots to show how its obstructed airway technique works and how simple it is: These will be distributed to local chapters who, in turn, will make them available to local television stations as public service announcements.

Also, a question and answer session on videotape has been put together for the use of local chapters. It shows a panel of experts responding to Dr. Heimlich's charges and is intended for use by Red Cross is staff and instructors.

The Red Cross believes that no single method may be effective in every case. That is why is advocates a three-step technique ranging from the least to the most traumatic. Dr. Heimlich's procedure is a single technique.



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