

baltimoresun.com

Hands-only CPR deemed sufficient

Heart group says chest compressions work as well as mouth-to-mouth method

Associated Press

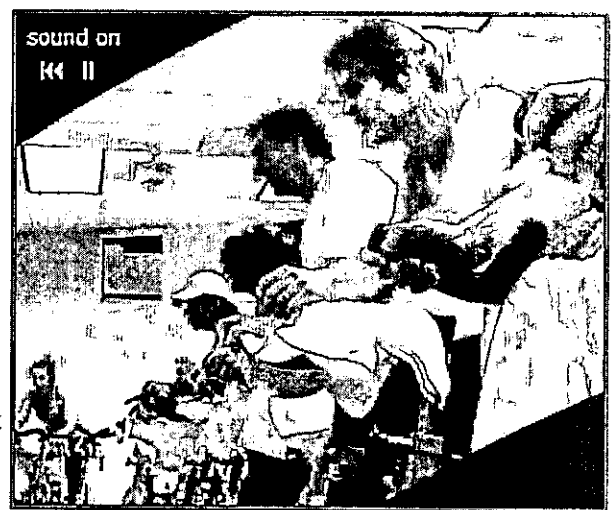
April 1, 2008

NEW YORK

In a major change, the American Heart Association said yesterday that hands-only CPR - rapid, deep presses on the victim's chest until help arrives - works just as well as standard mouth-to-mouth CPR for sudden cardiac arrest in adults.

Experts hope the change will increase the willingness of bystanders to help if they see someone collapse. Hands-only cardiopulmonary resuscitation is simpler and easier to remember, and it removes a big barrier for people who are skittish about the mouth-to-mouth breathing.

"You only have to do two things: call 911 and push hard and fast on the middle of the person's chest," said Dr. Michael Sayre, an emergency medicine professor at Ohio State University who headed the committee that made the recommendation.



Hands-only CPR calls for uninterrupted chest presses - 100 a minute - until paramedics take over or until an automated external defibrillator is available to restore a normal heart rhythm.

Such action should be taken only for adults who unexpectedly collapse, stop breathing and are unresponsive. The person is usually having cardiac arrest - a sudden stoppage of the heart - which can occur after a heart attack or be caused by other heart problems. In such a case, the victim has ample air in the lungs, and compressions keep blood flowing to the brain, heart and other organs.

A child who collapses is more likely to primarily have breathing problems, so mouth-to-mouth breathing should be used.

That also applies to adults who suffer from lack of oxygen from a near-drowning, drug overdose or carbon monoxide poisoning. In such cases, mouth-to-mouth breathing is needed to get air into their lungs and bloodstream.

In either case, "something is better than nothing," Sayre said.

The CPR guidelines had been inching toward compression-only. The last update, in 2005, put more emphasis on chest pushes by calling for alternating 30 presses with two quick breaths, or presses alone for those "unable or unwilling" to do the breaths.

Now the heart association has given equal standing to hands-only CPR.

Sayre said the changes were made now - the next update wasn't due until 2010 - because three studies last year found that hands-only was as good as traditional CPR. Hands-only will be added to CPR training.

An estimated 310,000 Americans die each year of cardiac arrest. About 6 percent of those who are stricken outside a hospital survive.

People who quickly receive CPR while awaiting medical treatment have double or triple the chance of surviving. Fewer than a third of victims get such essential help.

Dr. Gordon Ewy, who had been pushing for hands-only CPR for 15 years, said he was "dancing in the streets" over the heart association's change, though he doesn't think it goes far enough. Ewy is director of the University of Arizona Sarver Heart Center in Tucson, where the compression-only technique was pioneered.

Ewy said there is no point to giving early breaths in the case of sudden cardiac arrest and that it takes too long to stop compressions to give two breaths, 16 seconds for the average person. He noted that victims often gasp periodically anyway, drawing in a little air on their own.

Surveys have found that many people are reluctant to perform mouth-to-mouth CPR, Ewy said, partly because of fear of infections.

"When people are honest, they're not going to do it," he said. "It's not only the yuck factor."

In recent years, emergency service dispatchers have been coaching callers in hands-only CPR rather than telling them how to alternate breaths and compressions.

Copyright © 2008, The Baltimore Sun

[Wireless](#)[Home](#)[Local News](#)[U.S. & World](#)[Weather](#)[Traffic](#)[Sports](#)[Business](#)[Consumer](#)[Politics](#)[Health](#)[Entertainment](#)[Food](#)[Pets](#)[Water Cooler](#)[Seen on WJZ](#)[Contests](#)[Links &
Numbers](#)[Special Reports](#)[Pump Watch](#)[Environment
Watch](#)[Health Kit](#)[Your Home](#)[It's Academic](#)[On Time](#)[Morning Edition](#)[Manic Monday](#)[Weekend](#)[Morning Edition](#)[News Team](#)[TV Schedule](#)[Lottery](#)[Horoscopes](#)[Community
Calendar](#)[Services](#)[Classifieds](#)[Careers](#)

ADVERTISEMENT



Healthwatch [Resources & More](#)

© Apr 1, 2008 2:44 pm US/Eastern

[Digg](#) | [Facebook](#) | [E-mail](#) | [Print](#)

Video

Heart Association Introduces Hands-Only CPR

[Click Here For Information On Hands-Only CPR](#)



Reporting
Ron Matz

BALTIMORE (WJZ) —

From now on you can skip the mouth-to-mouth breathing and just press on the chest to save a life.

It's a major policy change announced by the American Heart Association.

Ron Matz reports on the new CPR guidelines and what doctors are saying.

Dr. John Blenko is an anesthesiologist at the University of Maryland Shock Trauma Center.

He is also a CPR expert and applauds the guidelines that call for the hands-only method.

"What the Heart Association has decided is that if we can do compressions only for someone during the first couple of minutes of a cardiac arrest, that we will provide lots of blood going around to the body's tissues, the heart, and the brain," said Dr. Blenko.

Now you can skip mouth-to-mouth. Hands-only CPR calls for uninterrupted chest presses. Experts administering the new CPR should aim for 100 presses for each minute.

"During those first couple of minutes of the resuscitation, you still have lots of oxygen left in your body, you don't need to do mouth-to-mouth ventilation," said Dr. Blenko.

Experts say with the hands-only technique bystanders may be more willing to jump in and help if they see someone suddenly collapse.

Hands-only CPR is not for infants, children and some adults. But in many cases you can just press on the chest to save a life.

(© MMVIII, CBS Broadcasting Inc. All Rights Reserved.)

From Our Partners



Careers: Make your resume stand out



FEATURED STORY
American Heart As
1 hour 46 minutes

[Healthwatch](#)



Related Links

[Click Here For More Information On Hand CPR](#)

April 1, 2008

CPR Can Help, Even With No Training

By NICHOLAS BAKALAR

Even people without CPR training can save the life of an adult whose heart stops, and the American Heart Association has issued an advisory urging everyone, trained or not, to act immediately in such an emergency.

The procedure is simple: if you see an adult collapse after having a heart attack, immediately call 911 and then push hard and fast in the middle of the chest continuously, until emergency medical personnel arrive or an external defibrillator can be used.

Dr. Michael R. Sayre, the lead author of the recommendations, said in a telephone interview that the ideal would be 100 pushes a minute with enough force to make the chest go down two inches, but, he added, "there is no need to use a metronome and a ruler." Dr. Sayre is an associate professor of emergency medicine at Ohio State University.

CPR, or cardiopulmonary resuscitation, can more than double the survival rate in cardiac arrest, but only about a third of people who collapse get CPR from bystanders.

The advice does not apply to cardiac arrest in children, or that due to drowning or drug overdose, which usually require rescue breathing. Nor does it apply when the bystander does not see the collapse, since it might not have been cardiac arrest.

But the exceptions, Dr. Sayre said, are only about a quarter of all cardiac arrests. "We want people to act no matter what," he said, "and one of the reasons it's important to take a CPR class is because of this other 25 percent.

"But doing chest compressions alone in these situations is better than doing nothing," he said. "Even for children, the procedure would be the same."

Chest compression keeps blood flowing, but it does not reoxygenate the blood, as mouth-to-mouth resuscitation does.

The recommendations, being published in the April issue of *Circulation*, are based on new studies of CPR techniques. They update advisories published in 1997 and 2005.

Numerous studies in animals, and five others in humans, have convinced experts that hands-only CPR from an untrained bystander is usually as effective as CPR with mouth-to-mouth resuscitation performed by a person trained in the technique.

There may be several reasons. Rescuers performing traditional CPR take longer to start than those who use hands only, maybe because it takes more time to prepare, intellectually and emotionally, for the more complex and intimate procedure. Studies have also shown that bystanders performing conventional CPR interrupted chest compressions for longer than the recommended 10 seconds while doing mouth-to-mouth resuscitation, resulting in fewer compressions.

Surveys suggest there may be reluctance to perform mouth-to-mouth resuscitation because of fear of infection, but this is probably a minor barrier. More commonly, CPR-trained bystanders cite panic and fear of causing further harm as reasons for inaction. Such fears are unwarranted.

"If you do nothing, the person will die," Dr. Sayre said. "And you can't make them worse than dead."

Copyright 2008 The New York Times Company

[Privacy Policy](#) || [Search](#) || [Corrections](#) || [RSS](#) || [First Look](#) || [Help](#) || [Contact Us](#) || [Work for Us](#) || [Site Map](#)
