

COMPRESSION-ONLY CPR

The Lifeguarding Experts

INFORMATION BULLETIN

Recent reports have stated that compression-only ('hands-only') CPR is as effective as the traditional combination of compressions and rescue breathing. It is important to note that for aquatic staff and management, due to drowning being a hypoxic event (oxygen deficiency in the lungs due to likely aspiration of water), rescue breathing is still critical.

Compression-only CPR Acceptable	Compression-only CPR Not Acceptable
Unable or unwilling to do traditional CPR	Near-drowning of adult, child or infant
Those untrained in traditional CPR	Unwitnessed cardiac arrest
Adult unexpectedly collapses	Child or infant unexpectedly collapses
Adult has abnormal or no breathing	Adult suffering from overdose
Adult is unresponsive	Adult suffering from carbon monoxide poisoning

In order to increase the chance of survival for victims of sudden cardiac arrest, the emphasis is on the fact that if compression-only CPR is more likely to be done, and survival rates are similar to traditional CPR, then more lives will be saved if more people are doing CPR, compression-only or traditional. It is important to note that the ILCOR guidelines have not changed and that all instruction of CPR in Lifesaving Society programs will remain the same at this time.

The Medical Committee of the International Life Saving Federation (ILS) states:

"The International Life Saving Federation urgently reminds all would-be rescuers that hands-only CPR is not appropriate in cases of drowning. The American Heart Association (AHA) Emergency Cardiovascular Care (ECC) Committee has recently published a statement on cardiopulmonary resuscitation (CPR) (1). This recommends that bystanders who witness an adult suddenly collapsing out of hospital should perform chest compressions only without giving mouth-to-mouth ventilation, so-called hands-only CPR.

Drowning is the second leading cause of accidental death worldwide. While hands-only CPR may be effective in cases of sudden heart attack, cardiac arrest during drowning is due, in large part, to lack of oxygen. The body is thus starved of oxygen and needs urgent replenishment in addition to circulation of blood that is provided by chest compressions.

Similarly, compression-only CPR is inappropriate in cases of cardiac arrest in children, when failure of breathing is the usual underlying cause.

The AHA ECC Committee statement includes: "this call to action for bystanders does NOT apply to unwitnessed cardiac arrest, cardiac arrest in children or cardiac arrest presumed to be of non-cardiac origin". The ILS concurs with this, but is concerned that the overwhelming emphasis on hands-only (compression-only) CPR in the statement will mean that this secondary advice may be overlooked.

Further information can be found in the Medical section of the ILS website, <u>www.ilsf.org</u>. In particular, attention is drawn to the Medical Position Statements on Critical CPR Skills, Use of Oxygen, and In-Water Resuscitation."

ILS Medical Committee: Dr. Stephen Beerman, Dr. Joost Bierens, Dr. Zaid Chelvaraj, Dr. Phillip Dickinson, Dr. Anthony Handley, Angela Lawson, Dr. David Szpilman, and Dr. Peter Wernicke. (Issued April 3, 2008.)