Chest-Compression Alone Cardiopulmonary Resuscitation: Newer Data for a More Practical Approach/ Cardio-Cerebral Resuscitation

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ABSTRACT

BACKGROUND: Sudden cardiac death (SCD) is a leading cause of mortality in the industrialized nations and, accordingly, is a major public health problem. Despite the guidelines and their updates, the survival rate of victims of out of hospital cardiac arrest (OHCA) remains disappointingly low. There are many contributors to poor survival outcome of victims with OHCA. An improper resuscitation algorithm seems to be the major contributor. Chest-compression alone cardio pulmonary resuscitation (CC-CPR), and cardio-cerebral resuscitation (CCR), seems an attractive alternative to conventional CPR.

METHODS & RESULTS: Reviewing the recent literature, cardiac-only resuscitation emerges as an attractive alternative to conventional CPR, as this simpler technique of CPR, in which continuous chest compressions are provided without rescue breathing, avoids the need for mouth-to-mouth ventilation. Under the weight of evidence supported by several recent studies, the AHA issued a science advisory for the public recommending immediate activation of emergency medical services (EMS) after the victim's collapse and high quality chest compression regarding location and depth with minimum interruptions. Bystanders not trained in CPR are encouraged to initiate immediately hands-only CPR and continue with compressions until an AED is available or EMS arrives at the scene.

CONCLUSION: CC-CPR and CCR is not inferior to conventional CPR but also promises a survival benefit for victims of OHCA.

Abbreviations
AED= automatic external defibrillator
AHA= American Heart Association
CC-CPR= chest-compression cardio pulmonary resuscitation
CPR= cardiopulmonary resuscitation
EMS= emergency medical services
OHCA= out of hospital cardiac arrest
SCD= sudden cardiac death

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