

Arrest to first compression time and survival outcome in witness OHCA.

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Introduction



- Out of hospital cardiac arrest is a serious health condition
 - can lead to detrimental outcomes
- The effect of EMS response time on patient survival has been evaluated in many studies
 - impact of bystander CPR on critical time intervals for patient outcomes not well known

Aims/Hypotheses



 investigate whether bystander CPR influences the time from arrest to first chest compression.

Methods



- Design / setting
 - prospective, international, multi-center cohort study
 - across the Asia-Pacific on out-of-hospital cardiac arrest
 - January 2009 to December 2012
 - Inclusion
 - EMS-treated witnessed OHCA
 - presumed cardiac origin
 - Exclusion
 - no information of CPR started time or OHCA outcomes
 - arrest occurred in ambulance.

Methods



- Exposure variable
 - arrest to CPR start and bystander CPR
- Outcome measure
 - Primary endpoint
 - Survival to discharge or 30-day survival
 - Secondary endpoint
 - neurologic recovery at discharge

Methods



- Statistical analysis
 - Logistic regression
 - Adjusting possible confounders
 - Interaction analysis
 - Bystander CPR & time to first chest compression
 - On survival outcome

Significance



- Expected outcome
 - receiving bystander CPR will be less affected
 - by the amount of time until first compression
 - shorter EMS response time
 - leading to better clinical outcomes
 - be able to provide optimal range of EMS response time