

Incidence of VF in Asian OHCA

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Introduction



- The management of shockable rhythms (VF and pulseless VT) is a cornerstone of advanced life support
- In order to improve response to OHCA in Asia, it is important to understand the epidemiology of VF/VT in Asia

Aims/Hypotheses



Our objectives are to:

- Describe the epidemiology of VF/VT in Asia
- Study associated factors including:
 - Demographics
 - Characteristics of the incident
 - Characteristics of the response

The Questions



- What is the incidence of VF/VT in Asian OHCA?
 - How is it different from Western figures?
 - Is there any regional variation?
- What are the factors that may be associated with VF/VT, and can these explain any differences from the West?
 - Patient factors e.g. age, gender, race and medical history
 - Incident factors e.g. time of day, location
 - Response factors e.g. presence of bystander CPR, shorter response times
- What is the response?
 - Percentage received public defibrillation

Methods



This is a sub-analysis of a prospective multi-centre observational study among members of the PAROS research network of all adult OHCA patients (age >/=16).

Methods



- Descriptive statistics will be reported as means and standard deviations, median and inter-quartile ranges as well as proportions (percentages).
- Comparisons will be done using Chi-square, t-test and Mann Whitney-U, and ANOVA.

Significance



- Understanding of the incidence of VF in Asian countries and its associated factors will help identify targets for modification and improvement in the response to OHCA such as
 - EMS resource management
 - Public access defibrillation programmes
 - Public CPR training programmes.