# **PAROS BULLETIN**



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### PAROS PUBLICATIONS



[photo credit: Mr Helge Myklebust]

The PAROS main paper 1 – "Outcomes for Out-of-Hospital Cardiac Arrests across 7 Countries in Asia: The Pan Asian Resuscitation Outcomes (PAROS)" has been accepted Study Resuscitation in July 2015. This is a descriptive analysis of out-of-hospital cardiac arrests across the 7 participating PAROS countries – Japan, Korea, Singapore, Taiwan, Malaysia, Thailand, and United Arab Emirates-Dubai. We found in the study that survival to hospital discharge for Asia varies widely and this may be related to patient and system differences. This implies that survival may be improved with interventions such as increasing bystander CPR, public access defibrillation and improving emergency medical services.

The PAROS network has planned several secondary research proposals such as paediatric OHCA, incidence of ventricular fibrillation in Asia, survival





prediction models, etc. The list of proposals as well as a list of past publications can be found on the PAROS webpage:

http://www.scri.edu.sg/scri/index.php/publicationsparos

We are also in the midst of investigating modifiable factors related to OHCA survival using the PAROS data. This study will help us understand the relative impact of factors driving survival to advise policy in an Asian setting. This could potentially help countries prioritise investments to their PEC systems.



### DISPATCHER-ASSISTED CARDIOPULMONARY RESUSCITATION

## CPR helpline a real life-saver

BY KASH CHEONG

ORE people are surviving cardiac arrests in Singapore – and it's not just down to

Friends, loved ones and even strangers are increasingly performing cardiopulmonary resuscitation (CPR) on cardiac arrest victims.

The emergency procedure involves chest compressions and giving a "kiss of life", which can be crucial in saving a victim.

Four years ago, only two out of 10 cardiac arrest patients received CPR from a bystander. But this number has doubled, largely thanks to a phone service which lets 995 callers get step-by-step CPR instructions from health-care staff until an ambulance arrives.

It was launched in 2012 by the Ministry of Health's Unit for Pre-Hospital Emergency Care.

It was launched in 2012 by the Ministry of Health's Unit for Pre-Hospital Emergency Care, the Singapore General Hospital (SGH) and the Singapore Civil Defence Force. Survival rates have also in-

Survival rates have also increased from 3.6 per cent to 4.6 per cent over the last four years, which is "good progress", according to Marcus Ong, senior consultant at SGH's department of emergency medicine. After a person collapses, his chances of surviving falls by 10 per cent every minute.

In Singapore, it takes an average of 10 minutes for an ambulance to arrive and 46 minutes before the patient gets to hospital. Paramedics may perform additional treatment along the way.

"If you are relying on paramedics or hospital doctors to save a cardiac arrest patient, it might be too late. Bystander CPR really gives the patient a fighting chance," said Associate Professor Ong.

He was speaking on Wednesday at SGH's Survivor Awards event, which honours cardiac arrest patients and their life-savers

rest patients and their life-savers.

However, Dr Ong believes
more can be done to increase survival rates for a condition which
affects 1,800 people here every
year.

year.
"In places like Seattle, Washington, survival rates are about 20 per cent," he added. "Most strangers would perform CPR on others and kids learn how to do it in school."

He attributed the higher survival rates there to good school and community outreach, which have been ongoing for 60 years.

In Singapore, the People's Association and the National Resuscitation Council are training the public and grassroots leaders, while schools like Victoria Junior College also teach the life-saving procedure.

procedure.

By 2020, Dr Ong aims to have someone trained in CPR in every household. However, there are barriers to this – such as people being deterred by having to resuscitate someone they have never met.

Pointing out that eight out of 10 cardiac arrest cases happen at



LUCKY: Ms Tan called 995 when she saw her mother's eyes roll up and tongue hang out last year. A calm voice talked her through the CPR process. Madam Lee survived and it prompted her husband, Mr Tan, to sign up for a CPR course. PHOTO: THE STRAITS TIMES

home, he added: "If it's a stranger on the street, people think, 'Why should I bother?' But, if you learn CPR, more often than not, you might end up saving a loved one."

Nurse Amanda Tan did just that. When the 31-year-old saw her mother's eyes roll up and tongue hang out last year, she panicked and called 995. A calm voice over the phone talked her through the process. "Even though I had learnt CPR, at that moment, I was in a daze," she said. "It really helps you compose your thoughts and remember what to do."

remember what to do."
Her mother, Lee Mary Ann, survived the ordeal. It prompted her father, Eric Tan, to sign up for a CPR course. "My mother said she was lucky to survive," said Ms Tan. "But we are even luckier to have her back."

"If it's a stranger on the street, people think, 'Why should I bother?' But, if you learn CPR, more often than not, you might end up saving a loved one."

A/Prof Marcus Ong PAROS Chair

Source: My Paper, 5 September 2014, Pg A2

In the last issue of the PAROS newsletter (Volume 4 Issue 2, December 2014), we shared about the Dispatcher-Assisted first REsponder – DARE program, an initiative led by the Unit for Prehospital Emergency Care (UPEC), an unit that is funded by the Ministry of Health, Singapore. The DARE program is a short 1-hour training session which teaches the layperson how to dial the centralised dispatch number in Singapore and how to work with the dispatcher to deliver chest compressions and use an automated external defibrillator (AED).

In this report published in "My Paper" in Singapore, we saw how dispatcher-assisted CPR (DA-CPR) can help save lives. Madam Lee suffered a cardiac arrest while at home in 2014. Her daughter, Ms Amanda, a CPR-trained nurse, promptly called the centralised dispatch number (995) and received chest compression instructions from the dispatcher. Ms Amanda said that she was in a daze after witnessing the collapse of her mother and having someone coached her over the phone on delivering CPR kept her calm and helped her remember the steps.

### COMMUNITY CARDIOPULMONARY RESUSCITATION IN THE ASIA-PACIFIC

# Habit Microte Cox Cox Van (191) and Brown Burch I as all a significant CSD behing service at the Mitterial Coxer.

fealth Minister Gan Kim Yong (left) and Reverend Derrick Lau at a simplified CPR training session at the Methodist Church of the Incarnation. The training is being extended to religious organisations and workplaces. ST PHOTO: WONG KNAI CHOW

# Big push to get more people trained in CPR

Singapore every year er cent of the victims

Goal: At least one person in every home trained in simplified technique

### By SAMANTHA BOH

A BIG push is being made to get a least one person in every house hold trained in a simplified cardi opulmonary resuscitation (CPF procedure)

The Unit for Pre-Hospital Emergency Care (Upec) has given itself five years to do it, said its medical director Marcus Ong, The plan is to extend the Dis-

The plan is to extend the Dispotcher Assisted first Responde or Dare, programme to religior organisations and workplaces, be said. Till now, the year-old programmer has been making the rounds only in schools and abox 8,000, mainly students, hav been trained.

We want to reach out to on million people within the next fiv years, Associate Professor On said, "We need to expand the pox of people in Singapore who ar ied technique
tion in Choa Chu Kang be
the first among religious g
to be trained.
Sixty church-goers were

Sixty church-goers were given a quick session after their morning church service.

Health Minister Gan Kir Yong, who was guest of honour however, encouraged participant to learn the standard CPR, which included mouth-to-mouth ventilation.

He added that it was the preferred method for cardiac arrest in children and in drowning case-He also noted that mosout-of-hospital cardiac arrest

out-of-hospital cardiac arrest happen in the victim's home o places he frequents, often in the presence of relatives, friends on eighbours.

"(So) by preparing for the unexpected, the skills acquired toda

pected, the skills acquired tod may end up saving lives of som one we know or someone we lo in the future if we dare to st up," he said. A big push is being made to get at least one person in every household trained in a simplified CPR procedure.

[Source: Straits Times, 22 June 2015, Pg B7]



[Source: Tamil Murasu, 19 July 2015]

"The vast majority of cardiovascular incidents occur in public and in people's homes. So if you've got a broad population trained on how to handle an event like that, how to keep someone alive, it could have a real impact on mortality in China."

AHA International Committee Chairman Douglas Boyle The DARE program has been rolled out to the community through religious organizations as well as the workplaces. Pictured above was a DARE session at one of the churches in Singapore, which was graced by the Minister of Health for Singapore. Pictured left was one of the DARE sessions at the Hindu Endowments Board, a statutory board in Singapore which administers funds for the support of Hindu temples and other Hindu-related events/activities. DARE hopes to reach out to 1 million people in Singapore in the next 5 years.



[Source: news.xinhuanet.com, 24 June 2015]

An agreement to launch a medical training program, consisting of CPR training and awareness initiatives, physician exchanges, and cardiopulmonary science engagement opportunities, in China was signed between China's Ministry of Science and Technology and American Heart Association in June 2015.

### PAN-ASIAN TRAUMA OUTCOMES STUDY



Professor Lee A. Wallis and A/Prof Sang Do Shin at the PATOS meeting in Hong Kong, ICEM 2014

"We hope that PATOS will lead to constructive information on trauma, and ultimately, to interventional strategies for reducing the burden of trauma."

A/Prof Sang Do Shin PATOS Chair

In the fall of 2015, the Asian EMS Council launched an international, multicenter study that involves collecting and analyzing information of trauma in Asian-Pacific countries. The Pan-Asian Trauma Outcomes Study (PATOS) Clinical Research Network has now developed a web-based database and variables dictionary (ver. 1.0) to begin data collection.

The Pan-Asian Trauma Outcomes Study (PATOS) is a population-based study to identify burdens of trauma in Asia. Data from multiple Asian-Pacific countries will be integrated to standardize database of trauma. Researchers will collect data using emergency dispatch records and hospital medical records. While there have been substantial advances in trauma care in recent years, there are still needs and challenges in the understanding of incidence and prevention measures of trauma.

"The aim of PATOS is to develop a trauma surveillance system that allows analysis of secular trends and understanding of injury," said Dr. Sang Do Shin, chairman of the PATOS Clinical Research Network. "We hope that PATOS will lead to constructive information on trauma, and ultimately, to interventional strategies for reducing the burden of trauma."

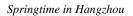
PATOS is accepting applications from interested sites and will hold the PATOS Symposium and Workshop on 7 and 8 October 2015 in Seoul, Korea. The symposium will provide a great opportunity for researchers to share the demographics and trauma-related features of their countries. The workshop will also have lectures and round table discussion about potential research topics using PATOS data. Researchers interested in the study can contact Min Jung Kim, PATOS coordinator at <a href="minkim229@gmail.com">minkim229@gmail.com</a>.

Article contributed by: Pan-Asian Trauma Outcomes Study Clinical Research Network

### PAST EVENTS

### Hangzhou, Zhejiang, China, 27 – 29 March 2015







Tour of ZPPH



Dr Cai Wenwei showing delegates around ZPPH's museum



Overseas speakers with the local organising committee at the welcome meeting of the conference



Commencement of the PAROS-China conference/ International Forum on EMS of China

The International Forum on Emergency Medical Services (EMS) of China/ PAROS-China conference was jointly organized by the Zhejiang Provincial People's Hospital (ZPPH) and PAROS. The conference was held at the HNA Resort Huagang in Hangzhou. Speakers included the four PAROS chairs and other PAROS site investigators, such as Dr Pairoj Khruekarnchana from Bangkok, Dr Nik Hisamuddin from Malaysia, Dr Benjamin Leong from Singapore, etc., as well as local speakers such as Mr Shan Chunchang, director of the emergency panel under the State Council, Prof Yu Xuezhong, Prof Lu Zhongqiu, etc. The themes of the conference were Disaster Management, Trauma, EMS, and Emergency Medicine. Topics included team-based resuscitation, building a world class EMS, importance and role of medical dispatch, etc. The EMS leaders and medical directors workshop was also first introduced to China at this conference.

A tour of the ZPPH was led by Dr Cai Wenwei, director of the Department of Emergency Medicine of ZPPH, and his team, including PAROS member Dr Zhou Sheng Ang. The PAROS, Pan-Asian Trauma Outcomes Study, and Asian EMS Council meetings were held on 27 March 2015. The meetings were attended by participants from Mongolia, Pakistan, India, China, Singapore, Taiwan, Japan, Philippines, etc.

### **PAST EVENTS**

### Hangzhou, Zhejiang, China, 27 - 29 March 2015



Dr Zhou presenting his study proposal at the PAROS open meeting



Prof Tanaka at the Asian EMS Council meeting discussing the possibility of an advanced EMS Leaders and Medical Directors workshop



PAROS EXCO meeting



Prof TV Ramakrishnan giving an update on PAROS in India



Mr Bagus Rahmat giving an update on PAROS in Indonesia



PAROS dinner at the Zhejiang Hotel

### **UPCOMING EVENTS**

### Taipei, Taiwan, 7 – 10 November 2015







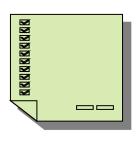
### **Schedule of PAROS/PATOS/AEMSC meetings**

### 7 November 2015, Cathay General Hospital

- ❖1230 1400 The Asian EMS council meeting and election
- ❖1400 1415 Asian EMS Awards ceremony
- **❖**1415 − 1545 PATOS meeting
- **♦**1545 − 1600 Break
- **♦**1600 1800 PAROS meeting
- **❖**1730 − 1930 − ACEM 2015 welcome reception
- 3F Banquet Hall, Taipei International Convention Centre
- ❖2000 2200 PAROS Dinner (by invitation only)

Venue to be confirmed

For more information about the conference, please go to: http://www.acem2015.org/



### **BECOMING ONE OF US**

To become one of us, please go to: <a href="http://www.scri.edu.sg/scri/index.php/members-paros">http://www.scri.edu.sg/scri/index.php/members-paros</a> to download the registration form. Kindly submit the completed form to <a href="mailto:paros.secretariat@yahoo.com">paros.secretariat@yahoo.com</a>.

If you have any feedback or would like to feature updates on OHCA, pre-hospital emergency care, EMS, etc. from your country in the PAROS newsletter, kindly write to Ms Maeve Pek, PAROS secretariat, at <a href="mailto:pek.pin.pin@sgh.com.sg">pek.pin.pin@sgh.com.sg</a>.



Old and new PAROS members at the Zhejiang Provincial People's Hospital in Hangzhou

