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PRESS RELEASE

“Kiss of Death – Paramedics and lifesavers fear new resuscitation technique could kill patients”

The Australian Resuscitation Council (ARC) has been made aware of an article that was published in the Sunday Telegraph on August 13th 2006. The Council is concerned that the article makes a number of statements that are inaccurate, misleading and could be potentially harmful. It is unfortunate that these statements have been made as they cause unnecessary confusion and anxiety amongst the community.

The ARC is Australia's peak body responsible for developing resuscitation guidelines and comprises representation from various medical, nursing, ambulance and community organisations involved in the teaching and practice of resuscitation. The guidelines and subsequent recommendations are produced after carefully reviewing the scientific evidence, considering clinical experience and seeking input from the councils many member organisations. Updated guidelines were released in March 2006 following the most extensive international review of the resuscitation science ever undertaken. The ARC was part of this review process along with other resuscitation councils including the American Heart Association, the European Resuscitation Council and Resuscitation Council of Southern Africa.

Of particular concern to the ARC are the following statements that appeared in the newspaper article.

“The speed of compressions will almost double.”

This is incorrect as the rate of compressions has always been 100 per minute. What does change is the number of compressions delivered, will increase as more compressions and fewer ventilations are delivered, when using a compression / ventilation ratio of 30:2.

“Professional lifeguards and Paramedics fear the guidelines, which includes not checking the pulse, will put lives at risk.”

“Carrying out chest compressions on someone who is alive with a pulse could interfere with their heart rhythm, provoke a cardiac arrest and ultimately kill them”

There is no evidence whatsoever that performing chest compressions on someone who has a pulse will cause harm. In fact the recommendation has been for decades that chest compressions should be performed in unconscious children where their pulse is slower than normal. The same is often the case for unconscious adults who have slow pulse rates. This has been done without harm and does not cause disturbances of heart rhythm.

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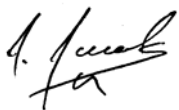
“It could be disastrous if well meaning first aid officers started compressing everyone who fainted on hot days or passed out from alcohol or drug use.”

The ARC is not advocating that everyone who collapses has chest compressions performed on them. What the council is recommending is that patients who are UNCONSCIOUS, NOT MOVING and NOT BREATHING NORMALLY should receive chest compressions. Where the patient has merely fainted they will still be breathing so clearly chest compressions are not needed. There is considerable evidence that when using the pulse check on someone who has suffered a cardiac arrest you have a 50:50 chance of correctly determining if a pulse is present or absent. In other words it is just as useful as tossing a coin. The greatest risk is to patients who need CPR but don't get it because the rescuer believes the pulse to be present. In this situation the likelihood of survival falls dramatically.

It is interesting to note that while the guidelines were updated in 2006, the changes that raised concern in the newspaper article were part of changes made by the ARC back in 2000.

The updated guidelines have been endorsed by all members of the ARC. This includes St. John Ambulance, Surf Life Saving Australia, Royal Life Saving Australia, Ambulance Services throughout Australia, National Heart Foundation, Australian Red Cross, Cardiac Society of Australia and New Zealand, Colleges of Nursing and Colleges of Medicine including Emergency Medicine, Intensive Care, Surgeons, Anaesthesia and General Practice. The ARC is somewhat surprised by the notion that some in the community believe that the ARC, and every resuscitation council around the world, would recommend a practice that was harmful.

Further information can be obtained from the ARC website (www.resus.org.au) including the ARC guidelines and answers to frequently asked questions.



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