

# Do bystanders accept to provide CPR?

Dami F<sup>1,2</sup>, Fuchs V<sup>1</sup>, Yersin B<sup>2</sup>

1.Fondation Urgences-Santé, Lausanne, Switzerland 2.Emergency Department, University Hospital Lausanne (CHUV), Switzerland.

## SCIENTIFIC BACKGROUND

We know from previous studies that telephone CPR (T-CPR) improves survival after an out of hospital cardiac arrest (CA).

Most CA occur at home.

Do bystanders accept and perform T-CPR, and if not what are the reasons?

## AIM OF THE STUDY

To measure bystanders T-CPR's acceptance rate.

To understand bystanders reasons not to accept T-CPR.

To understand bystanders reasons not to provide T-CPR although they accepted instructions from the dispatcher.

## METHODS

### Settings:

All our dispatchers are either paramedics or nurses.

Our EMS is in charge for all medical emergencies in the State of Vaud (650'000 inhabitants, 80'000 calls and 30'000 missions per year)

### Methods

We prospectively collected all non traumatic cardio-respiratory arrests (Naca 6&7) during an 8 months period.

Situations where a professional was on site (doctor, nurse, paramedic) were excluded.

For each case T-CPR was proposed and refused, dispatchers recorded the reason for the bystanders non acceptance.

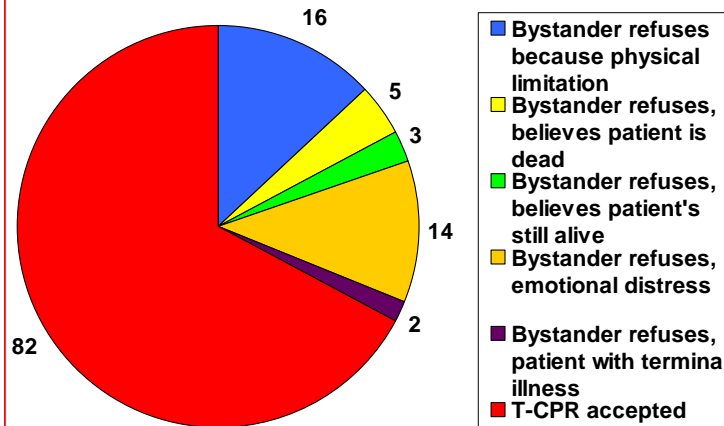
The reason for acceptance but non-performance of T-CPR was also recorded.

All tapes were reviewed by the medical director of the EMS center.

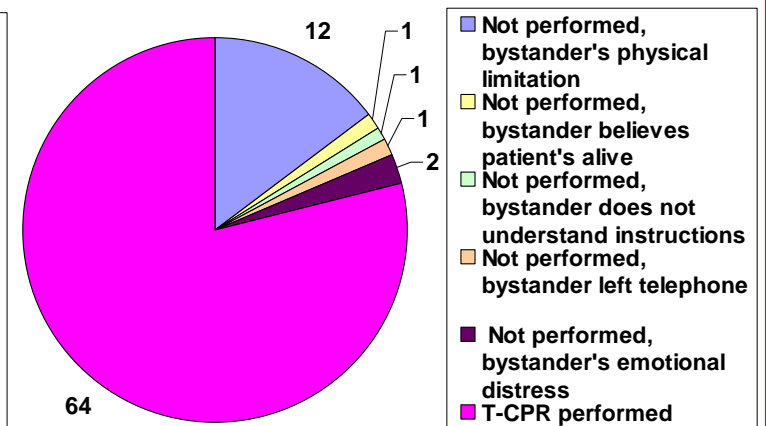
Dispatchers understanding was then compared to the audio tape and the opinion of the medical director.

## RESULTS

Total T-CPR proposed by dispatchers: 122 cases



TCPR accepted by bystanders: 82 cases



## CONCLUSION

On 82 occasions (68% of cases), bystanders accepted TCPR when proposed

No bystanders refused to provide CPR fearing contagious diseases, probably because the new guidelines suggest to skip ventilation for adults non traumatic CA. None refused fearing to hurt the patients.

Those two reasons, often mentioned to explain the low rate of CPR by bystanders, seem to be a myth.

Once T-CPR has been accepted, it was only performed on 63 occasions (78% of all T-CPR accepted), mainly because bystanders over-estimated their physical abilities.

This study confirms that the low rate of T-CPR does not come from bystanders will or ability, but from the capacity from dispatchers to suspect CA.

It is interesting to notice that for all paediatric situations included in this study (11 cases), all bystanders accepted to provide T-CPR with ventilation. They were all the parents of the children.

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