

ECCU 2017 CONFERENCE & EXHIBITION • A CALL TO ACTION...AND ALL THAT JAZZ!

Restart a Heart Day

Sophie Skellett











Presenter Disclosure Information

Sophie Skellett Restart a Heart Day

FINANCIAL DISCLOSURE:

No relevant financial relationship exists

AFFILIATIONS (unpaid):

- Chair EPALS subcommittee RC(UK)
- Executive committee member RC(UK)
- Deputy Chair Paediatric sub-committee RC(UK)
- NCAA steering group





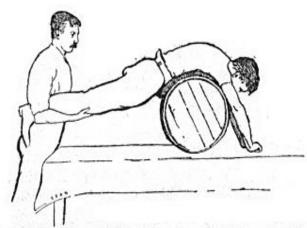
Out-of-Hospital Cardiac Arrest

 Our management of Out-of-Hospital Cardiac Arrest (OHCA) has come a long way.....



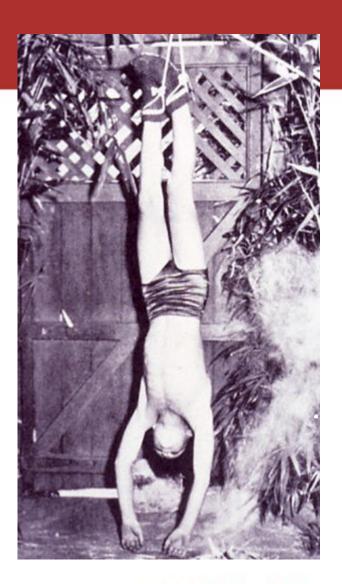


1700....in the UK



The "barrel" method. Commencement of the inspiratory phase.

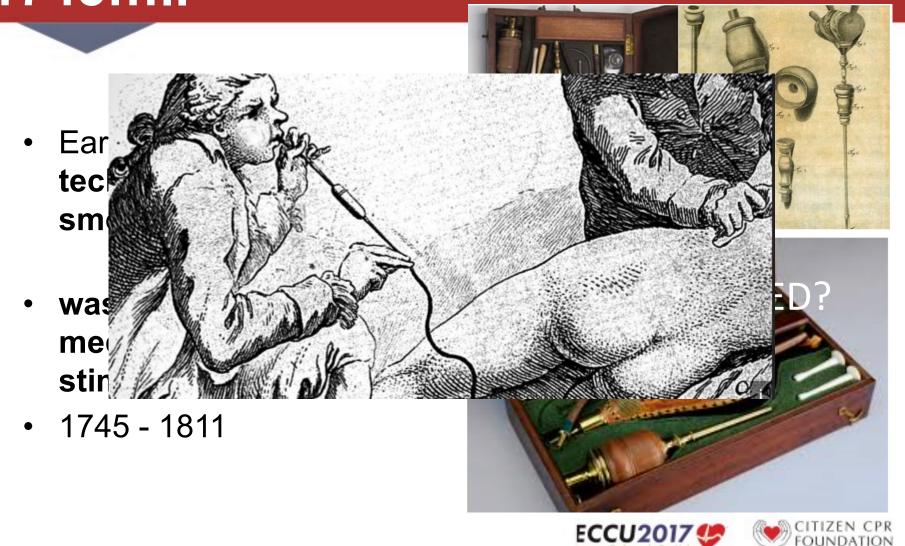








CA secondary to drowning.......



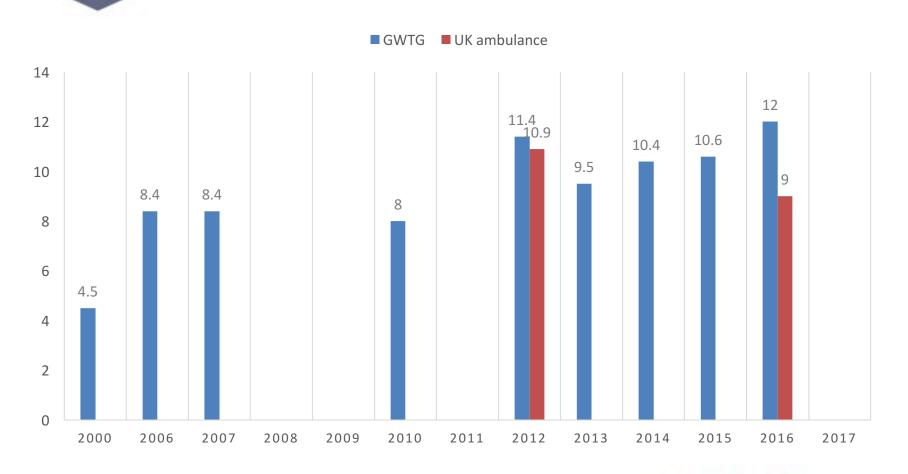
What now?

-but despite science having markedly improved our techniques for CPR since then
- survival figures for OHCA have remained disappointingly low over past 20 years
-and very variable from country to country and region to region





OHCA – % survival to hospital discharge









From: Regional Variation in Out-of-Hospital Cardiac Arrest Incidence and Outcome

JAMA. 2008;300(12):1423-1431. doi:10.1001/jama.300.12.1423

Table 3. Incidence and Outcome of EMS-Assessed Out-of-Hospital Cardiac Arresta

	Alabama (n = 715)	Dallas (n = 2462)	lowa (n = 1028)	Ottawa (n = 2965)	Pittsburgh (n = 1217)	Portland (n = 1320)	Seattle (n = 2349)	Toronto (n = 5155)	Vancouver (n = 2373)	Overall (n = 19 584)
Adjusted incidence rate per 100 000	106.7	159.0	93.1	71.8	105.1	77.5	144.0	96.8	75.9	95.0
Adjusted mortality rate per 100 000	103.3	153.2	86.1	68.9	101.1	71.4	131.8	93.5	70.0	90.0
Case-fatality rate, %	96.9	96.0	92.7	96.0	96.3	92.0	91.8	96.4	92.1	94.7
Survival to discharge, %	1.1	2.4	6.1	3.3	3.3	6.5	8.1	3.2	6.7	4.4
Vital status data missing, %	2.0	1.5	1.2	0.7	0.3	1.5	0.1	0.4	1.2	0.8

Abbreviation: EMS, emergency medical services.

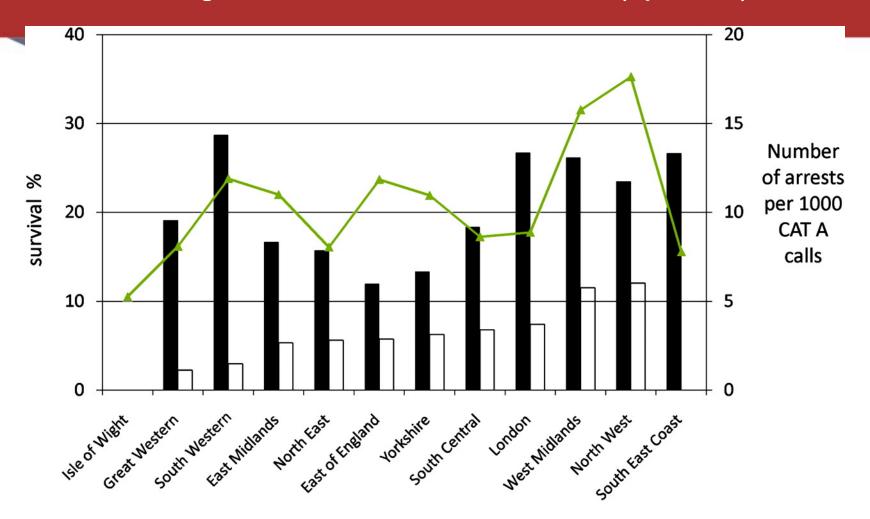
Figures from 2006-2007





^a Milwaukee was excluded from this analysis because of self-reported incomplete data on patients in whom resuscitation was not attempted. All rates were unequal across sites at P < .001.

Cardiac arrest, return of spontaneous circulation (ROSC) and survival to discharge rates for UK Ambulance Services (April 2011).



Gavin D Perkins, and Matthew W Cooke Emerg Med J 2012;29:3-5





What about comparison with in-hospital cardiac arrest?





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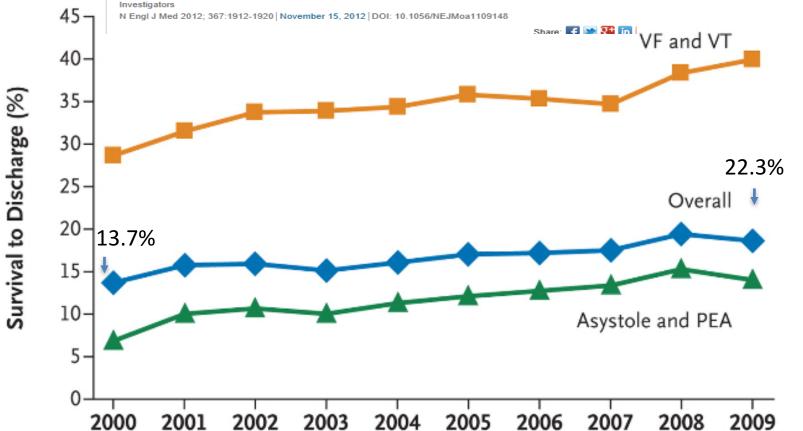
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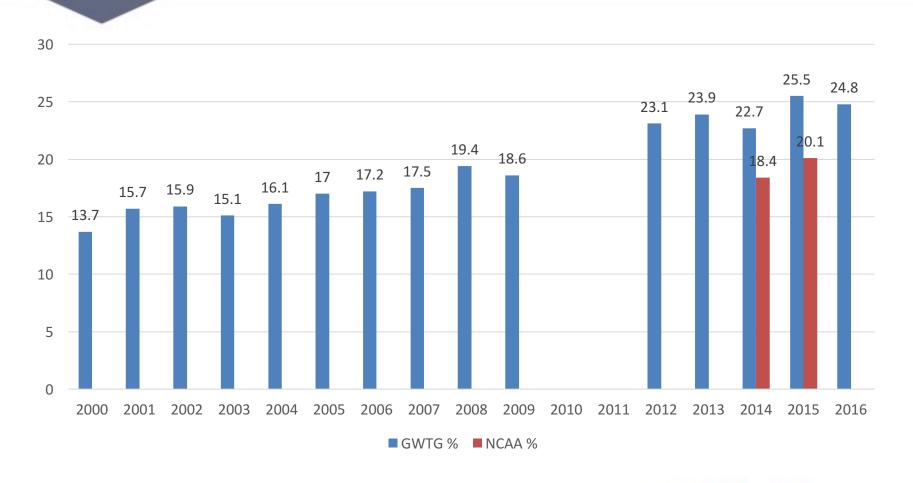
ORIGINAL ARTICLE

Trends in Survival after In-Hospital Cardiac Arrest

Saket Girotra, M.D., Brahmajee K. Nallamothu, M.D., M.P.H., John A. Spertus, M.D., M.P.H., Yan Li, Ph.D., Harlan M. Krumholz, M.D., and Paul S. Chan, M.D., for the American Heart Association Get with the Guidelines-Resuscitation Investigators



Adult IHCA - % survival to hospital discharge





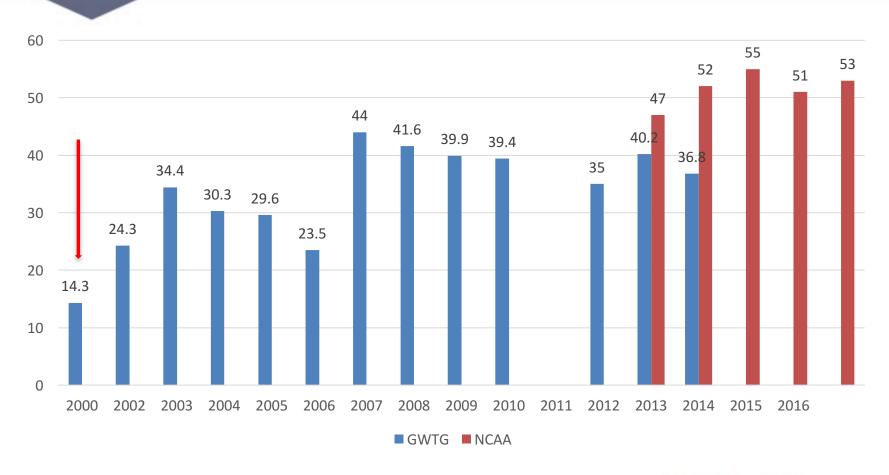


What about IHCA survival in children?





% Survival to hospital discharge for Paediatric IHCA



Girotra, Circ Cardiovasc Qual Outcomes 2013





Survival OHCA vs IHCA

- OHCA 60 80% patients arrest of cardiac origin
- And IHCA sicker patients, fewer present in CA with shockable rhythms
- ...therefore OHCA survival rates should theoretically be better than IHCA





Why the difference?

- CPR not started in crucial early window within the first 4 – 6 minutes and variable quality
- Ambulance fast response time 7-8 minutes (if achieved) and a few minutes for them to be activated
- Poor rates bystander CPR
 - Fear doing harm, not knowing what to do, being sued...
 - Fear AED
 - Not knowing where AEDs located
 -the resuscitation community has not got the message across as effectively as they had hoped









Alerts trained volunteers to Cardiac Arrests Integrates with CAD Database of > 28,000 AEDs Over 19,000 volunteers registered Highly governed and flexible

UK public survey 2017

- Government survey 2000 adults
- 1 in 5 had witnessed an OHCA
- 58% had had some form of training in CPR
- 93% would phone 999
- 58% would perform CPR (76% trained)
- 56% would perform COCPR
- 42% would retrieve a defibrillator (74% trained)
- Use defib: 74% if trained/ 24% if not trained

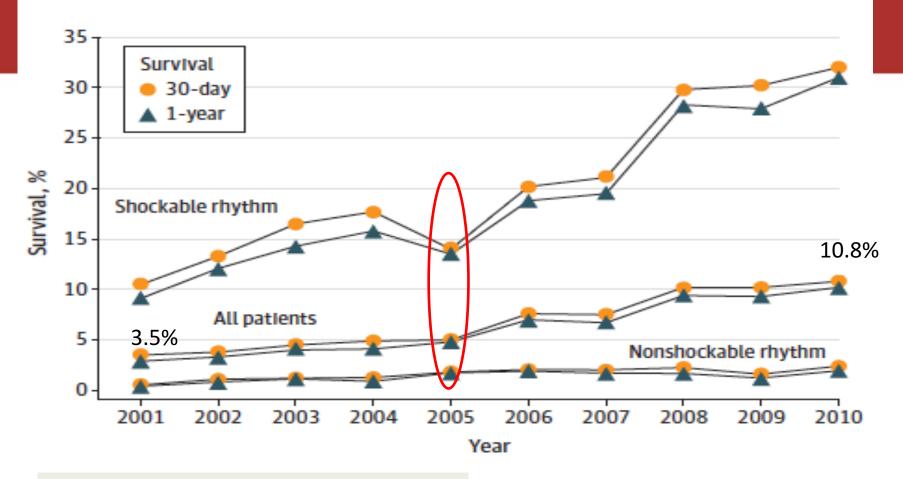




Does Bystander CPR make a difference?



Figure 3. Survival Following Out-of-Hospital Cardiac Arrest, 2001–2010



JAMA. 2013;310(13):1377-1384. doi:10.1001/jama.2013.278483

21.1% to 44.9% bystander AED 1.1% to 2.2%

Association of National Initiatives to Improve Cardiac Arrest Management With Rates of Bystander Intervention and Patient Survival After Out-of-Hospital Cardiac Arrest

Mads Wissenberg, MD; Freddy K. Lippert, MD; Fredrik Folke, MD, PhD; Peter Weeke, MD; Carolina Malta Hansen, MD; Erika Frischknecht Christensen, MD; Henning Jans, MD; Poul Anders Hansen, MD; Torsten Lang-Jensen, MD; Jonas Bjerring Olesen, MD; Jesper Lindhardsen, MD; Emil L. Fosbol, MD, PhD; Søren L. Nielsen, MD; Gunnar H. Gislason, MD, PhD; Lars Kober, MD, DSc; Christian Torp-Pedersen, MD, DSc

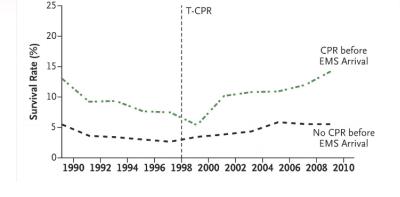


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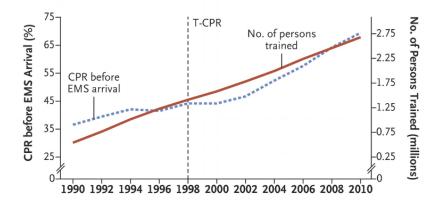
ORIGINAL ARTICLE

Early Cardiopulmonary Resuscitation in Out-of-Hospital Cardiac Arrest

Ingela Hasselqvist-Ax, R.N., Gabriel Riva, M.D., Johan Herlitz, M.D., Ph.D., Mårten Rosenqvist, M.D., Ph.D., Jacob Hollenberg, M.D., Ph.D., Per Nordberg, M.D., Ph.D., Mattias Ringh, M.D., Ph.D., Martin Jonsson, B.Sc., Christer Axelsson, R.N., Ph.D., Jonny Lindqvist, M.Sc., Thomas Karlsson, B.Sc., and Leif Svensson, M.D., Ph.D. N Engl J Med 2015; 372:2307-2315 | June 11, 2015 | DOI: 10.1056/NEJMoa1405796



Sweden 9.7 mill pop; 3 million trained Registry data, Swedish resus council 1990 – 2011 30,381 witnessed arrests; 15,512 with bystander CPR (10.5% 30 day survival); 14,689 no bystander CPR (4% 30 day survival)







Association of Bystander Cardiopulmonary Resuscitation With Overall and Neurologically Favorable Survival After Pediatric Out-of-Hospital Cardiac Arrest in the United States

A Report From the Cardiac Arrest Registry to Enhance Survival Surveillance Registry

Maryam Y. Naim, MD1; Rita V. Burke, PhD, MPH2; Bryan F. McNally, MD, MPH3; et al

» Author Affiliations

JAMA Pediatr. 2017;171(2):133-141. doi:10.1001/jamapediatrics.2016.3643

- 46% had bystander CPR
- CPR survival: Bystander 13.2%; No Bystander 9.5% (Overall 11.3%)
- Neurologically favourable: Bystander 10.3%; No Bystander 7.59%
- 49% conventional CPR
- 51% COCPR
- Neurologically favourable better in conventional group
- Infants survival after COCPR similar to no bystander **ECCU2017**







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ORIGINAL ARTICLE

Bystander Efforts and 1-Year Outcomes in Out-of-Hospital Cardiac Arrest

Kristian Kragholm, M.D., Ph.D., Mads Wissenberg, M.D., Ph.D., Rikke N. Mortensen, M.Sc., Steen M. Hansen, M.D., Carolina Malta Hansen, M.D., Ph.D., Kristinn Thorsteinsson, M.D., Ph.D., Shahzleen Raian M.D. Freddy Lippert M.D.

Fredrik Folke, M.D., Ph.D., Gunnar Gislason, M.D., Ph.D., Lars Køber, M.D., D.Sc., • E. Jensen, M.D., Ph.D., Thomas A. Gerds, Ph.D., Christian Torp-Pedersen, M.D., D. Ph.D.

N Engl J Med 2017; 376:1737-1747 | May 4, 2017 | DOI: 10.1056/NEJMoa1601891

Conclusion:

Bystander CPR associated with decreased risk brain injury, nursing home admission and lower risk death

- Linked CA registry with functional outcomes – death, nursing home, anoxic brain injury
- Bystander rates 66.7% to 80.6%
- AED use 2.1% to 16.8%
- Rate brain injury from 10% to 7.6%
- All cause mortality 18% to 7.9%



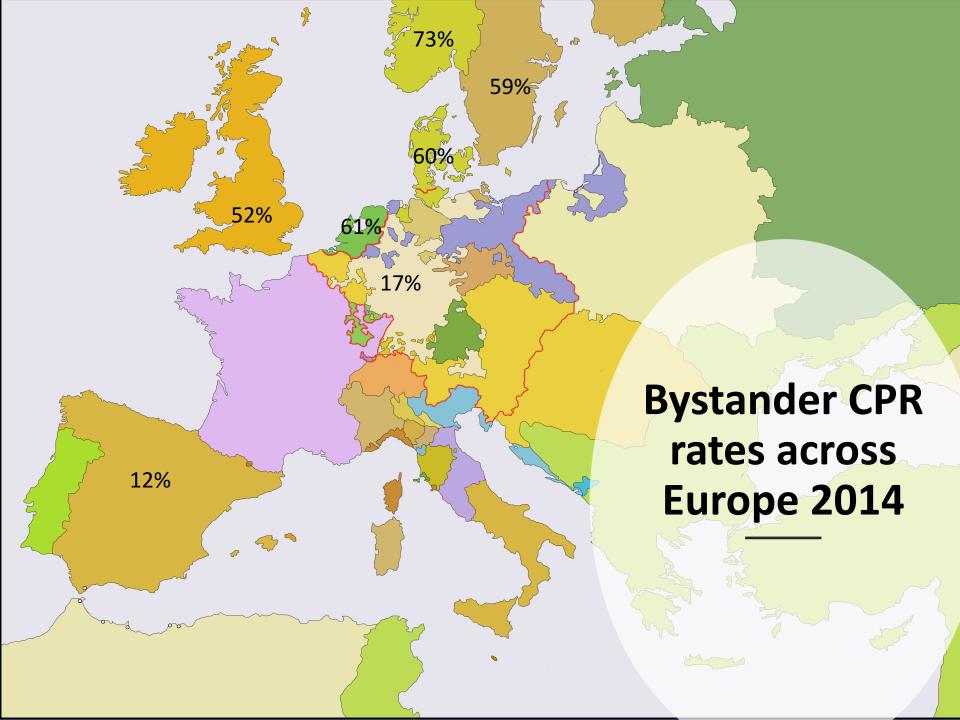


So how did Restart a Heart Day come about?

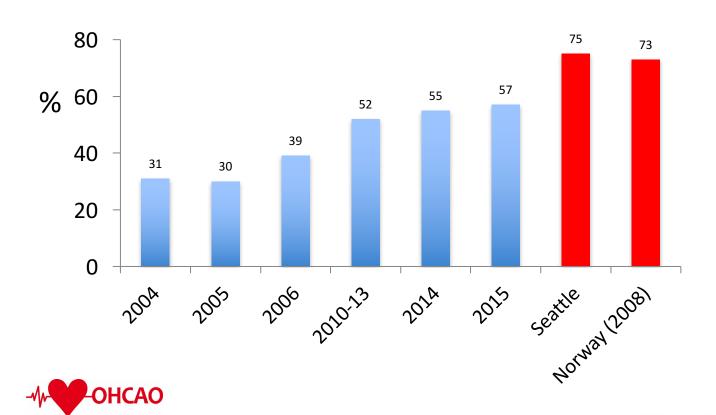
- In 2011 it was clear to the European resuscitation community that bystander rates were variable across Europe
- Additionally that countries with better bystander rates had better outcomes from OHCA







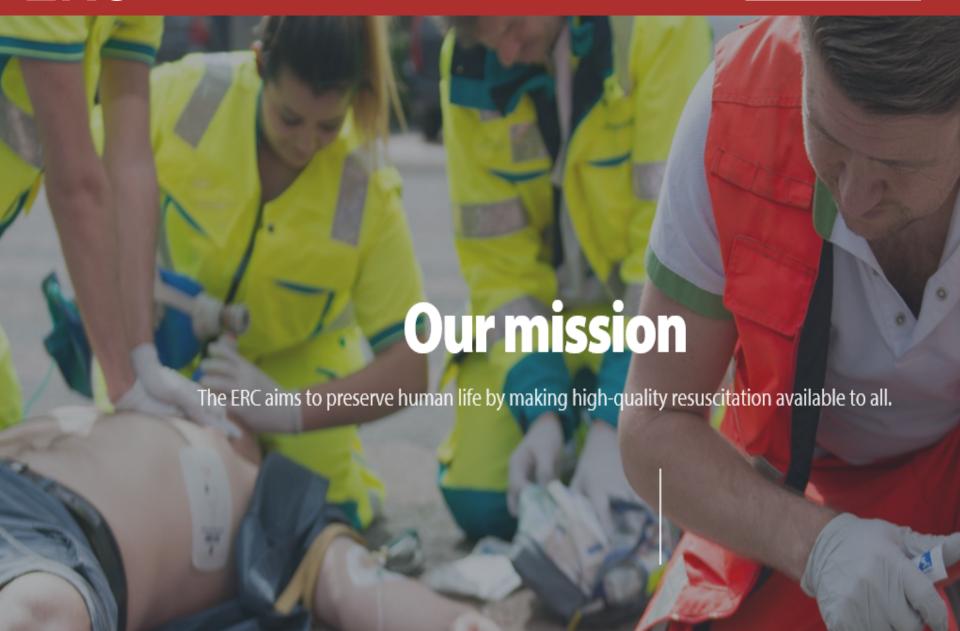
Bystander CPR UK-data 2016











European Resuscitation Council:



- Austria
- Belgium
- Bosnia and Herzegovina
- Croatia
- Cyprus
- Czech Republic
- Denmark
- Netherlands
- Egypt
- Finland
- France
- Germany
- Hungary
- Iceland
- Italy



- Malta
- Norway
- Poland
- Portugal
- UK
- Romania
- Russia
- Serbia
- Slovakia
- Slovenia
- Spain
- Sudan
- Switzerland
- Tunisia

- Turkey
- UAE



















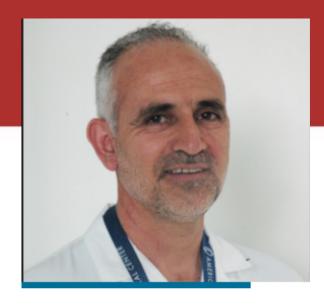




Endurlífgunarráð







1. Calls on the Commission and the Council to encourage:

Marios Georgiou

- the adoption of common programmes for implementing AED in public places and training lay people in all Member States,
- the adjustment of legislation in order to facilitate CPR and defibrillation by non-medical persons,













Texts adopted

Thursday, 14 June 2012 - Strasbourg

European cardiac arrest awareness week

Declaration of the European Parliament of 14 June 2012 on establishing a European cardiac arrest awareness week

The European Parliament,

- having regard to Rule 123 of its Rules of Procedure,
- A. whereas in Europe approximately 400 000 people suffer an out-of-hospital sudden cardiac arrest every year, with a survival rate of less than 10%;
- B. whereas the survival of many apparently healthy victims depends on cardiopulmonary resuscitation (CPR) administered by bystanders and early defibrillation, and whereas an intervention within 3-4 minutes may increase the chance of survival to more than 50%;
- C. whereas in Europe, automated external defibrillator (AED) programmes are only partially implemented;
- 1. Calls on the Commission and the Council to encourage:
 - the adoption of come on programmes for implementing AED in public places and training lay people in all Member States,
 - the adjustment of legislation in order to facilitate CPR and defibrillation by non-medical persons,
 - systematic data collection for feedback and quality management in every programme;
- 2. Calls on the Commission and the Member States to establish a European cardiac arrest awareness week aimed at improving the awareness and education of the general public, physicians and healthcare professionals:
- Calls on the Commission to support the Member States in adopting and implementing national strategies for equal access to high-quality CPR;
- Leals on the Commission and the Member States to enact harmonised legislation across the EU in order to provide immunity from liability to non-medical first responders who offer voluntary assistance in cardiac emergencies;
- 5. Instructs its President to forward this declaration, together with the names of the signatories (1), to the Council, the Commission and the parliaments of the Member States.





16th October 2013

- First event







Restart a Heart 2013 – 'Children Save Lives'

- Several countries hosted a RSAH day in 2013
- Theme: targeting children
- Germany
- Malta National Sports Complex
- UK Lifesaver RC(UK), lobbying for CPR on secondary school curriculum, ambulance trusts
- European Parliament



RSAH UK

- Co-ordination in each country took time
- Pockets of success
- 2015 RC(UK) co-ordination of all events and to promote more activity
- Andy Lockey from RC(UK) CEOs all ambulance Trusts - all signed up
- BHF, RC, RC(UK), St. JA, Amb Trusts











RSAH GOSH











Liesje and Denise





RSAH GOSH 2016

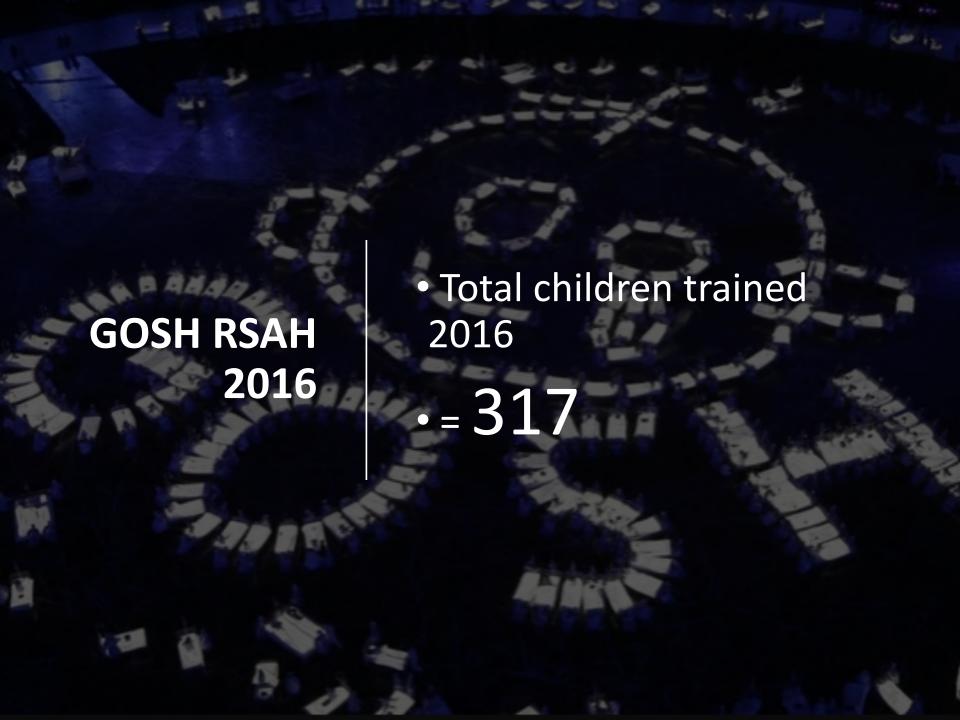
- Invited local schools by ringing around headmasters
- Children of staff invited with parents!
- Past patient reps PICU invited
- Charity and Press office liaison
- Young Survivor CA invited
- Ready availability instructors EPALS
- Standardised training
- Lifesaver video on monitors
- Goody bags: stickers, presents
- Free food for everyone
- Representatives RC(UK) and GOSH exec team
- Televised London Tonight



RSAH GOSH 2016

GOSH RSAH, London 2016





https://life-saver.org.uk/



Restart a Heart Day 2016

Kids saving lives



EUROPEAN RESTART A HEART DAY

- Aim was to train >100,000 young people
- Engagement from every UK Ambulance Service
- National collaboration between organisations led by RC(UK)
- Total trained = 150,581





Restart a Heart Day 2017

- Bigger and better, beat 2016 totals
- Events planned on or around Monday 16th October
- Harness good work of existing local/regional schemes
- Aim to train as many young people as possible in CPR
- Target = 150,000 +
- National co-ordinator hired by RC(UK)

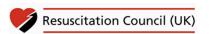






Restart-a-Heart Day 2017















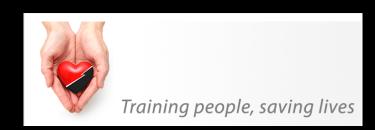






From the RC (UK) website

 Restart a Heart Day 2017 is a designated day of action across Europe with the aim to teach vital life saving cardiopulmonary resuscitation (CPR) skills to as many people as possible. This was the fourth year bringing young people together up and down the country to learn how to save lives.



Restart a Heart Day – 16 October 2017 Guide for First Aid Training Providers



Liaise with a local secondary school or youth group who hasn't already signed up for restart a heart day. You can find an information pack and flyer to give them here: https://www.resus.org.uk/events/rsah/

If necessary, we can put you in touch with your local ambulance service, who might have schools on a waiting list.



Eligible schools can apply to the British Heart Foundation, who will provide a **free restart a heart pack** for the school. This includes 35 inflatable CPR minikins and a CPR training DVD. The pack will belong to the school and should be retained for future use.



We recommend a minimum ratio of 1 facilitator to 12 children. For 35 children, this could be one qualified first aid trainer, with two assistants who are proficient in CPR.

See info below on DBS checks*



Of course, you can also use your own CPR training manikins!

Smaller groups are acceptable if you don't have as much kit. When you know what equipment is being used, you can confirm your attendance with the school/youth group.

PLEASE LET US KNOW DETAILS using this form: http://bit.ly/RSAHD2017Survey

Jason Carlyon National Project Manager Restart a Heart Dr Andrew Lockey Hon. Secretary Resuscitation Council (UK) RC (UK) also provided step by step advice on how to organise an run each event

RSAH



- One of the keys to success in the UK was to partner with high profile organisations such as the British Heart Foundation, a charitable organisation – their extensive media reach and marketing campaigns guaranteed a large audience
- Additionally they were able to offer free school packs with training videos and started the 'CPR champions programme' which appealed to children
- Schools were also able to apply for AEDs

Build confidence, save lives

Select volunteers to represent life saving across your school. First, put up the poster and sign-up sheet to generate interest. Then select your Champions and present them with the letter and licence card to mark their commitment.

Use your Champions to promote CPR in assemblies and tutor groups, to organise the trainings and to record names and numbers.



Use CPR as an opportunity to confidence and skills.



A commitment to helping others

Training in CPR is a chance to become a lifesaver. Can you rise to the challenge?



A great communicator

Can you explain CPR to a room of your peers? Get the message out and save lives.

A skill for collecting data

The BHF needs to know how many young people are being trained. Can you make a list of everyone in your training and reporting

Someone who thinks ahead

Can war areas CDD



Sheffield Football players motivating Ambulance Service fans



fans Information







Why don't you learn CPR? One day you could save a life!

On Monday 16 October 2017, to mark European Restart a Heart Day, we precardiopulmonary resuscitation (CPR) training to more than 25,000 youngstes secondary schools across Yorkshire. A huge thank you to all the volunteers, youngsters who made it possible!

If someone suffers a cardiac arrest, their chances of survival double if it hap bystander who immediately starts CPR before our arrival.

Watch this space for how to register for Restart a Heart Day 2018!









Only 1 in 10 survive a cardiac arrest

WE CAN BEAT THAT



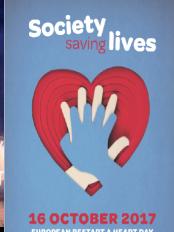
RSAH GOSH 2017

- Invited local schools by ringing around headmasters
- Timetable for schools
- Volunteers to show the way
- Children of staff invited with parents!
- Charity liaison
- Young Survivor CA invited again!
- Ready availability instructors EPALS
- Standardised training
- Industry input
- Lifesaver VR video on monitors
- Goody bags: stickers, presents
- Magicians, Facepainting
- Free food for everyone
- Representatives RC(UK) and GOSH exected team
- Consent to photograph schoolchildren!



GOSH RSAH, London 2017











Lifesaver and Lifesaver VR

- Original Lifesaver updated with 2015 guidelines
- Additionally Lifesaver VR developed to show teenagers saving teenagers in more immersive way
- Dispatcher advice given
- Used in sessions to enhance learning
- https://life-saver.org.uk/





- Primary outcome: Immediate F2F superior
- No difference 3 and 6 months
- Secondary outcomes: All gps >60 %
 CCF
- Combined > LS and F2F at 3 and 6 months

- 3 UK schools
- 81 students
- LS vs F2F vs combined
- Outcomes:
 - CC rate and depth
 - CCF, CPR performance and attitudes
- Measured immediately, 3 and 6 months

- For those who cant get F2F training good option
- Reinforce F2F





Social Media reach

- #Restartaheart trended in the UK
- 198 posts across 🔰 🖪 🛭 🛅
- Social reach of 344,224 from Thunderclap
- Total social media reach of 1,138,914







Restart-a-Heart Day 2017



- Total from Ambulance Trusts in 2016 was 117,000
- Total from Ambulance Trusts in 2017 was 145,000

Special mention:

- North West and West Midlands trained >30,000
- Isle of Wight trained 428
- Northern Ireland trained 600













Restart-a-Heart Day 2017



- Total from Ambulance Trusts in 2016 was 117,000
- Total from Ambulance Trusts in 2017 was 145,000
- Training provided separate to Ambulance Trusts 35,000
- Additional numbers included participants from RCEM anniversary event the week before







Total Number Trained for Restart a Heart 2017

195,623





Community training

- RSAH day part of KIDS SAVE LIVES initiative of ERC
- Initiative to get at children in Europe taught CPR in schools
- Examples: Denmark and Sweden
 Now on board: Italy and Germany
-we have a lag problem







What now?

- Plans already commencing for Restart a Heart 2018
- This time, however, it will be WORLD Restart a Heart Day!







Thank you!











195,623 trained in 2017 #RestartaHeart





Merry Christmas to all from London



And success in creating many more Lifesavers in the New Year