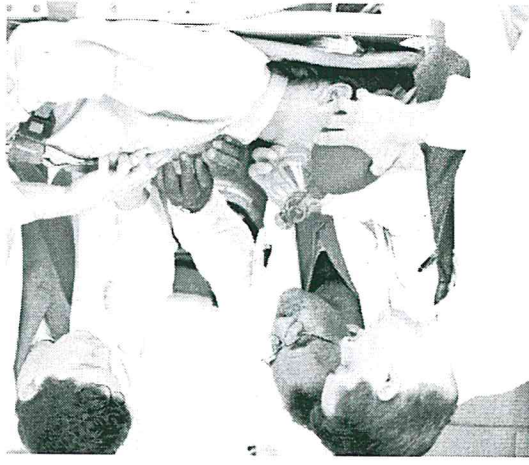


Limited Resuscitation Efforts

The best CPR results happen in the hospital with a trained team using all of the options available to them. Some people may not want to allow certain parts of a resuscitation effort. For instance, some may say, "I do not want to be on a respirator." That request lowers the chance of successful treatment because it reduces delivery of oxygen to the brain.

Other people may indicate they do not want to have chest compressions, but they are willing to allow medication. If medicine is placed in the veins but can't circulate because there are no heart compressions, the medicine stays in the arm and can't help the heart.

Some people might choose not to have electrical shock to the heart. But if the heart rhythm were highly irregular, without this shock all other efforts would fail. It is clear that the best results happen when all efforts are used.



Should I have CPR?

One way to think about this is to consider your goals and what it means to you to live well with your illness. If, in the best judgment of your physician and nurses, CPR would help you to live a meaningful life, you might wish to be resuscitated.

If it is not likely that CPR would help you meet your goals of living well, or might result in further dependence on machines and medication, you might wish to not be resuscitated, or to be allowed a natural death. When asked, many older patients would rather not remain alive if it means being connected indefinitely to today's technology.

This is an important decision. Advance Care Planning is available to help you think through your choices. Make your decision thoughtfully, in open conversation with your physician, family, nurses, and spiritual advisor.

References

The current manual of the American Heart Association and the American Medical Association, titled "Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care" has a bibliography of more than 500 references. Please refer to that resource for further information.

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CPR



Advance Care Planning Honoring Your Choices

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Make An Informed Choice About CPR

What is CPR?

CPR, or cardiopulmonary resuscitation, is an emergency first aid procedure to help someone whose heartbeat and breathing have stopped. It includes making sure the airway is open, breathing air into the lungs, and pressing on the chest to pump the blood through the heart. CPR is effective for healthy people whose heart suddenly stops beating. This is known as a cardiac arrest.

History of CPR

CPR was first used in the 1950s. The discovery that CPR could save people's lives led to the wider practice during the 1970s and 1980s of performing CPR on nearly everyone. Information gathered during that time led to several important observations about the effectiveness of CPR.

Does CPR work?

CPR is not usually effective on its own. When the heart stops beating, the most helpful remedy is a treatment known as defibrillation, using an electronic shock to try to correct the heart rhythm. CPR can keep a person alive for a few extra minutes to allow for the arrival of trained personnel with a defibrillator. CPR works best for people who are younger than 60, who have been in good health, and whose heart stops while on a monitor in an intensive care unit. In those circumstances, with a well-equipped, trained team on hand, the success rate of CPR may approach 35 to 40 percent.

Survival Rates

- In people who are older than 70, about 24 people out of 100 will be successfully revived in the hospital. Only seven out of 100 are likely to survive to go home.
- A person who has cancer or another serious, chronic disease has about a three percent chance of surviving a cardiac arrest. The chance of being well enough to return home is nearly zero.
- A person who has a cardiac arrest in the hospital that is not observed when it happens has about a one in 10 chance of surviving to go home. If the heart stoppage occurs outside of the hospital, the chances of success are about three out of 100.
- A nursing home resident with a serious, chronic disease who has a cardiac arrest has almost no chance of survival.



Complications

CPR is usually thought to be painless because the patient is unconscious. However, if CPR is successful there is often trauma to the chest that may be painful. CPR requires compression of the breastbone to squeeze blood out of the heart and into the blood vessels. Such compressions may result in fractures of the sternum and ribs. These broken bones could puncture the lungs, and possibly even the heart. Sometimes when CPR restarts the heart, the brain has been without oxygen for several minutes. In those cases, some patients who survive may have serious brain damage. For those people, as many as five out of 10 will have enough brain damage to require that they live in a nursing home.

