

CPR and AED

There are no reliable national statistics on CPR because no single agency collects information about how many people get CPR, how many don't get it who need it, how many people are trained, etc. Many studies have examined CPR in specific communities. While they show varying rates of success, all are consistent in showing benefits from early CPR. The following statements are fair generalizations:

- Right now early CPR and rapid defibrillation combined with early advanced care can result in high long-term survival rates for witnessed ventricular fibrillation.
- The value of early CPR by bystanders is that it can buy time by prolonging life during ventricular fibrillation. Early bystander CPR is less helpful if EMS personnel equipped with a defibrillator arrive later than 8-12 minutes after the collapse.

Sudden Cardiac Death (S.C.D.)

- Sudden cardiac death from coronary heart disease occurs over 680 times per day in the United States.
- Sudden cardiac death in people less than 21 years old is one-tenth as common as in adults, occurring in only 1 to 2 children per 100,000 per year.
- A review of published studies that report initial heart rhythms during cardiac arrest in children indicates that the majority (40-90 percent) have asystole (a-SIS'to-le) or pulseless electrical activity when first evaluated. However, ventricular fibrillation or ventricular tachycardia (ven-TRIK'u-ler tak''eh-KAR'de-ah) is found in up to 23 percent.

For additional information visit the American Heart Association website at www.heart.org.