MAFES Dawg Tracks

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Cough-CPR / A Simple Test for Hearts Smile Test - A Simple Test for Stroke



Articles have been circulating on the Web regarding methods of facilitating your health if you think that you are experiencing a heart attack or a stroke. I was attending a seminar and fire safety show, looking at Automatic Electronic Defibrillators (AED's). I asked the sales engineer about the validity of these alternate methods of heart and stroke tests. He referred me to the American Heart Association and to the American Stroke Association.

The following text will relay exactly what the **American Heart Association** has to say about "Cough-CPR":

- The AHA does not endorse this as a method of lifesaving.
- The AHA does not teach cough-CPR as part of a curriculum in any course.

These statements are noted in the textbook - Basic Life Support for Healthcare Providers. However, during a sudden arrhythmia (abnormal heart rhythm), it may be possible for a conscious, responsive person to cough forcefully and maintain enough blood flow to the brain to remain conscious for a few seconds until the arrhythmia disappears or is treated. Blood flow is maintained by increased pressure in the chest that occurs during the forceful coughs. This has been mislabeled "cough-CPR," although it's not a form of traditional resuscitation. **Cough-CPR** should not be routinely taught in lay-rescuer courses, because it would complicate the teaching of traditional CPR. It would add information that's not generally useful in a pre-hospital setting. In virtually all lay-rescuer CPR courses, the finding that signals an emergency is the victim's unresponsiveness. This signals the rescuer to begin the "A, B, and C's of CPR. Unresponsive victims will not be able to perform "cough-CPR."

This coughing technique to maintain blood flow during brief arrhythmias has been useful in the hospital, particularly during cardiac catheterization. In such cases, the patient's ECG is monitored continuously, and a physician is present. During cardiac catheterization, patients may develop sudden arrhythmias. If a life threatening arrhythmia is detected within the first 10 to 15 seconds and before the patient loses consciousness, a physician or nurse may tell the patient to cough. Repeated, forceful coughing can help the person stay conscious until the arrhythmia disappears or is treated. Therefore, the usefulness of "cough-CPR" is generally limited to monitored patients with a witnessed arrest in the hospital setting.

AMERICAN HEART ASSOCIATION:

The best strategy is to be aware of the early warning signs for heart attack and cardiac arrest and respond to them by calling 9-1-1.

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If you're driving alone and you start to have severe chest pain or discomfort that starts to spread into your arm and into your jaw (the scenario presented in the Internet article), pull over and flag down another motorist for help or phone 9-1-1 on a cellular phone.

The second part of this scenario is the discussion of the "SMILE TEST- A SIMPLE TEST FOR STROKE." The American Stroke Association does not endorse the"Smile test."

The Facts: A scientific poster presented at the 2003 **International Stroke Conference** titled "Untrained Adults can Identify Symptoms of Stroke Scale" suggested that asking three questions could help bystanders identify a stroke.

- 1. Ask the individual to smile.
- 2. Ask him or her to raise both arms.
- 3. Ask the person to speak a simple sentence coherently.

This presentation by researchers of the University of North Carolina-Chapel Hill School of Medicine was one of 450 presentations made at the conference hosted by the **American Stroke Association**. The poster showed positive results, but was a very small study. The research was funded by a grant from the **American Stroke Association**. **However, the American Stroke Association has not taken a position on this topic nor endorsed this test.**

STROKE WARNING SIGNS ARE:

- Sudden numbress or weakness of the face, arm or leg, especially on one side of the body.
- Sudden confusion, trouble speaking or understanding.
- Suddenly not seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden, severe headaches with no cause.

If you should recognize one or more of these signs or experience one of these symptoms – CALL 9-1-1-IMMEDIATELY!

TIME LOST IS POSSIBLE BRAIN LOST!

