

# Internal Medicine & Practice and Primary Care & Breast Pathology & Cancer Diagnosis

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## Out of hospital cardiac arrest: Does age and gender affect the association between delay to treatment and 30 day survival?

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**Introduction:** Gender and age have been shown as independent factors for survival after OHCA. A shorter delay to call the Emergency Medical Service (EMS) and start of cardiopulmonary resuscitation (CPR), and rapid defibrillation in shock able rhythm (ventricular fibrillation or ventricular tachycardia); are well identified factors impacting survival. Women suffering from OHCA are usually older and present less frequently with shock able rhythm. Data are conflicting whether they receive by stander CPR more or less often than men. Most reports have shown that advanced age is associated with poorer survival. However, the effects of age and gender on the association between delay to treatment and survival have not been examined.

**Aim:** The aim of this study was to examine the effect of age and gender on the association between delay to calling for the EMS, start of CPR, defibrillation, and survival.

**Methods:** This is a retrospective study from the Swedish Registry of Cardiopulmonary Resuscitation. We included 15745 patients aged >18 years where CPR has been attempted between 2011-2015. Patients were divided into two age groups. Higher age was defined as being 70 years or older. Delay times were divided into 4 increasing time intervals.


**Results:** There was no significant interaction between either age or gender and the association between delay to call for EMS and survival. However, there was a significant interaction between gender and the association between delay to start of CPR and survival being stronger among men. Furthermore, there was a significant interaction between age and the association between delay to defibrillation and survival being stronger among the elderly.

**Conclusions:** There was a strong association between delay to treatment and survival after OHCA. The association between delay to start of CPR and survival was stronger in men whereas the association between delay to defibrillation and survival was stronger among the elderly.

### Speaker Biography

Nooraldeen Al-Dury has obtained his Medical Degree from Charles University in Prague. Since then, He has been doing both Preclinical and Clinical Research at the Sahlgrenska Academy in Gothenburg, Sweden. He has finished Internal Medicine Residency in January 2018. He has held an Assistant Researcher post at The Mayo Clinic in Rochester, Minnesota, and is now involved with the Swedish Registry of Cardiopulmonary Resuscitation as a PhD Fellow. He plans to defend his Doctoral thesis within the next couple of years. With his presentation, he aims to share experiences from The Swedish Registry of Cardiopulmonary Resuscitation.

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