



Cardiopulmonary resuscitation

Statement on Cough CPR

The BLS/AED Subcommittee has received a number of enquiries from people who have been informed about "cough CPR" and "How to survive a heart attack when alone". Advice has been put on the Internet that someone who thinks he or she is suffering a heart attack should repeatedly cough and go at once to a hospital, by car if necessary.

This advice is based (very loosely) on published case reports of people being able to maintain some sort of cardiac output during cardiac arrest by vigorous coughing - so-called "cough CPR". The scenario has usually been of a patient developing ventricular fibrillation whilst being monitored, often whilst undergoing cardiac catheterisation. The patient has been encouraged to cough and a measurable circulation has been recorded. This anecdotal evidence supports the theory that chest compressions during CPR are successful because they increase intrathoracic pressure and result in a flow of blood. The collapsed veins and patent arteries at the thoracic inlet result in this flow being in a forward direction. Coughing produces the same effect.

The BLS/AED Subcommittee knows of no evidence that, even if a lone patient knew that cardiac arrest had occurred, he or she would be able to maintain sufficient circulation to allow activity, let alone driving to the hospital.

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References:

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