

Factsheet: Increase bystander initiated CPR by increasing proportion of population trained in CPR from 3.8m people to 5 million nationally

All figures per year	England	Per 100,000	Comments
Potential lives saved from intervention	300	0.56	Calculation based on CVD strategy
Potential lives saved U75	150	0.28	
Reduction in potential years of life lost (u75)	3000	5.5	<p>Definition of deaths used in the calculation: Deaths with a primary cause of myocardial infarction (ICD10 codes, I21-I22)</p> <p>Assumptions: That the distribution of deaths is the same as that for acute myocardial infarction</p>
Cost (£)	-	-	
Cost-saving (£)	-	-	
Net cost (£)	-	-	
Strength of evidence	2		

Currently CPR is attempted in only 20 percent to 30 percent of cases following an out of hospital cardiac arrest. However, evidence suggests that where CPR is attempted, survival rates are doubled. If we were able to increase bystander initiated CPR (to 42 percent from 32 percent) nationally we would expect to be able to save 300 lives per annum.

There are thought to be multiple reasons for low levels of bystander initiated CPR, including lack of training and fear of litigation. The CVD Outcomes Strategy proposes that all emergency service personnel could be trained in CPR and that basic life support skills could be taught more widely, e.g. in the work place and in schools. Other options might be; ensure all NHS staff who work with patients are taught CPR, including healthcare assistants, physiotherapy assistants etc. and work with local businesses and services, such as leisure centres and shopping centre security staff.

There are a number of organisations that offer training courses, such as the Red Cross Training. There is potential for CPR and use of AEDs to be delivered through e-learning.

The use of AEDs by bystanders at the scene of an out of hospital cardiac arrest (OHCA) can greatly increase survival rates. The introduction of AEDs into public places was supported by the Department of Health some years ago, and a number of charities and local interest groups have funded additional devices. However, there could still be much greater availability. Details about the location of available devices should be more consistently available to the emergency services and could usefully be available to bystanders, perhaps using a smartphone app.

Work on promoting site mapping of Automated External Defibrillators (AEDs) and ambulance services first responder programmes is being taken forward by NHS England with the Resuscitation Council, British Heart Foundation and Ambulance Services (Action 7 of the CVD Outcomes Strategy) It should be emphasised that the majority of OHCA occur in people's homes and so increased awareness of CPR skills is arguably of greater importance than availability of AEDs, though both will lead to increased survival from OHCA.

Resources and Case Studies

Heartstart schemes

The British Heart Foundation's website includes [details of Heartstart schemes](#) offering training in CPR across the UK.