

Loss of time common factor in deaths due to heart attack

SAVING LIVES Heart attacks, stroke and road accidents are time-sensitive, say doctors

Rhythmia Kaul

■ rhythmia.kaul@hindustantimes.com

NEW DELHI: Contrary to what you see in films, heart attacks take time to build up, starting with a mild chest discomfort. Often, people affected are not even sure what is wrong and wait too long before they seek help.

Loss of precious time—the first one hour of an attack—is the most common cause of death, say specialists. They claim in more than 50% cases, deaths could have been prevented if the patient had reached a hospital quickly. “Not everyone gets typical symptoms like pain in the chest, jaw and left arm; many times a cardiac arrest will seem like indigestion or tummy ache,” says Dr Priyadarshini Pal Singh, head of department, accident and emergency, Indraprastha Apollo Hospital.

According to doctors, FAST is the gold standard that global experts have come up with to determine cardiac arrest symptoms. F stands for face drooping to one side, A for arm weakness, S for slurred speech and T is for time that is precious and must not be wasted.

“There is a window period of just about 2-3 hours for the clot buster medicine to work. Heart attack, stroke and road accidents are time-sensitive, the rest can be managed as there’s plenty of time,” says Dr Talat Halim, director, emergency and trauma services, Fortis Memorial Research Institute.

“After four minutes the damage becomes irreversible as some brain cells die every minute after that. Doctors may be able to save a life but the person may have developed some life-long disability. After 8 minutes a person starts becoming vegetative,” adds Dr Halim.



■ In more than 50% cases, deaths could have been prevented if the patient reached the hospital quickly.

ARUN SHARMA/HT PHOTO

CRITICAL CARE IN AN EMERGENCY

- Start compression within 10 seconds of recognising there’s a cardiac arrest
- Push hard, push fast: a rate of at least 100 compressions per minute with a depth of at least 2 inches (or 5cm) for adults
- Allow complete chest recoil after each compression
- Minimise interruptions (try to limit interruptions in compressions to less than 10 seconds)
- Give effective breathing that makes the chest rise
- Avoid excessive ventilation
- Never learn CPR on live people
- During CPR if the ribs break do not worry
- After successful CPR take the victim to a hospital
- CPR should always be done on the floor or a hard bed
- Alternate cardiac massage on the chest after every two minutes



more on web

How stressed are you?

To know more visit hindustantimes.com/stressmetre

The origin of Cardio Pulmonary Resuscitation, known as CPR, 60 years ago was a result of experts brainstorming about how to be able to not only save lives but also maintain quality of life.

The American Heart Association had come up with a set of guidelines to empower a common man in saving lives. The guidelines kept getting improvised and finally a few months ago they came up with call and compress—call for help and start compression.

One must look for two R-responsiveness by touching the person a little and calling out his/her name and respiration by observing the person’s chest movement. If the chest is not going up and down that’s when one must start compressions. Doctors advise at least 100 compressions in a minute, and 80% of resuscitators time should be spent in giving chest compressions, which is as good as giving a CPR in a hospital.

“Even if one doesn’t know the correct way of giving a CPR,

one must make an effort as in absence of help the patient may be sinking; sometimes even a chest thump works,” says Dr Purshottam Lal, chief cardiologist, Metro Heart Institute, Noida. Angioplasty—propping open the clogged vessels using stents, is effective within 12 hours of an attack. “We have a dedicated cardiac emergency unit ready 24X7, with a senior heart specialist. We move the patient to a cath lab straight away without waiting for form filling and money etc,” he says.