

NEWSLETTER

Australian Resuscitation Council

November 2002

Vol 26, No. 3

ITEMS IN THE COUNCIL NEWSLETTER ARE FOR INFORMATION ONLY AND DO NOT NECESSARILY CONSTITUTE OFFICIAL COUNCIL POLICY. MATERIAL MAY BE COPIED FOR LIMITED DISTRIBUTION SUBJECT TO AN ACKNOWLEDGEMENT OF THE SOURCE.

"THE SPARK OF LIFE CONFERENCE IS ON THE MOVE"

Ever since the inaugural SOL conference, which took place in 1993, there have been discussions about one day moving the conference to another State. **That time has come.**

The 5th International Spark of Life Conference will be held at the

***Hilton Hotel
Adelaide, South Australia
15-16 April, 2005***

Workshops will be run on Thursday 14th April

Please make a note of these dates in your diary. Further details will be included in future Newsletters and on the ARC website, www.resus.org.au.

CHANGE FROM POLICIES TO GUIDELINES!!!

Many readers of this newsletter will have heard of or even be familiar with the concepts of evidence based medicine (EBM). EBM is the bringing together of the best scientific evidence, clinical experience and patient/community values to provide the best care. The concept is not new but has gained considerable momentum over the past 5 years or so both nationally and internationally. Much health related organisations are adopting an evidence based approach in deciding the best and most appropriate treatment guidelines.

Such is the importance that is now being placed on evidence based clinical guidelines, the National Health and Medical Research Council (NHMRC) has published guidelines for developing clinical guidelines. These guidelines have been developed by an expert panel and have been an invaluable source of information.

During the past twelve months the ARC has been examining the way it develops policies and how they should be developed within an evidence based framework. Accordingly the ARC has now adopted a number of principles which will facilitate an evidence based approach in developing policies. Some being more noticeable than others.

A notable change will be the renaming of ARC POLICIES to ARC GUIDELINES. This will make our guidelines consistent with the recommendations of the NHMRC and approaches adopted by other resuscitation councils internationally. It is also consistent with guidelines developed by many of the ARC member organisations and other health bodies.

A further change will be in the format of the guidelines. The Council will extensively evaluate the evidence on which the resuscitation guideline is being developed. Following this scientific review process the "level of evidence" underpinning the guideline will be stated using the NHMRC recommended nomenclature.

While clearly stating the evidence for the guideline is useful, the ARC will also make a recommendation for its use. These will be known as treatment recommendations and are based on the 3 principles of EBM mentioned earlier.

The changes discussed here have been drafted into the current policy statements 1.1 to 1.5 which provides the framework for evidence based resuscitation guidelines. These "re-drafted guidelines" are now out for comment.

The move to developing evidence based guidelines and foreshadowed changes will not happen overnight but be part of a transitional change as new policies are developed and old ones reviewed. I do emphasise that regardless of the name, they should be considered resuscitation guidelines. They are not prescriptive teaching documents but rather statements of what is considered best practice for treatment.

The formal move of the ARC in adopting a truly evidence based approach in developing and endorsing guidelines is an exciting direction for the Council. It will ensure that the ARC remains a relevant and respected organisation in the resuscitation field both nationally and internationally.

Assoc. Professor Ian Jacobs
National Chairman

METHOD OF CHECKING THE BRACHIAL PULSE IN INFANTS **P.S. 6.2.3**

This policy statement was considered at the recent Council meeting. Council believes that for the following reasons, a change to P.S. 6.2.3 is not necessary.

1. The pulse check by laypersons has been deleted.
2. Auscultated heart sounds are soft evidence of a circulation.

3. A study performed at The Children's Hospital at Westmead, NSW is interesting however, does not tell us anything about the ability of rescuers to reliably decide if a pulse is present or not, when there is indeed no pulse present. Only infants who had a circulation were studied. Investigators compared parental ability and accuracy (compared to a nurse) of pulse counting techniques (brachial palpation, apex palpation, apex auscultation, carotid palpation) in infants who all had a pulse. Among the 4 techniques, 86% of infants had a 'pulse' detected by apex auscultation, 86.5% by brachial palpation, 63% by apex palpation and 23.5% by carotid palpation. Auscultation was the most accurate at 57.5%, brachial palpation 41.5%, apex palpation 20.5% and carotid palpation 12%. The median times to achieve a decision were 5 seconds for apex auscultation, 10 seconds for brachial palpation, 12 seconds for apex palpation and 15 seconds for carotid palpation. The findings from the study are that brachial palpation yields an ability to feel a pulse equal to that of apex auscultation (which is not a good method of detecting a circulation anyway), had comparable accuracy and is performed within the critical time of 10 seconds.

Resuscitation Journal

Once again an arrangement has been made with Elsevier Science to enable "individual subscribers" of the ARC the opportunity to purchase copies of the Resuscitation Journal at a reduced price. The subscription for 2003 has been set at **A\$250.00**.

A subscription notice for 2003 is enclosed. If you wish to subscribe to this journal please ensure that your payment is forwarded to the ARC office by 31st January, 2003.

DRAFT POLICY STATEMENTS/GUIDELINES CURRENTLY UNDER REVIEW

The following Policy Statements/Guidelines have been issued to member organisations and State Branches, **as drafts**, for consideration at the next meeting of Council.

Guideline 1.1	Aims and Objectives of the ARC
Guideline 1.2	Guideline Decisions of the ARC
Guideline 1.3	Process for Developing Resuscitation Guidelines
Guideline 1.4	Principles and Format for Developing Guidelines
Guideline 1.5	Guidelines to the Style..... ? Delete ?Administrative Instruction
Guideline 5.4	Expired Air Resuscitation In Children and Infants
Guideline 8.1	Principles of Control of Bleeding for First Aiders
Guideline 8.7	Resuscitation of the Drowning Victim
P.S. 8.12	Emergency Management of A Victim who has Been Poisoned
P.S. 8.13	Emergency Management of Victims of Inhalational Incidents
P.S. 8.14	Cyanide Poisoning
Guideline 8.23	Anaphylaxis – First Aid Management
Guideline 11.7.1	Early Defibrillation
Guideline 12.7	Techniques in Paediatric Advanced Life Support

NEW AND/OR UPDATED POLICY STATEMENTS

Because of Council's decision to make the transition from Policy Statements to Guidelines, there are no new and/or updated policy statements being distributed with this Newsletter.

However, page 1 of the index showing a November 2002 date, is being circulated and is included with this Newsletter. It was decided to circulate the front page of the index so that when subscribers referred to their manual they would not think that they had received all updates for 2002.

2003 Subscription Renewal Notices

Your subscription renewal notice for 2003 is enclosed.

To ensure that you continue to receive the new and/or updated policy statements or guidelines, your subscription should be paid by 1st February 2003.



On behalf of the Australian Resuscitation Council, I would like to wish all readers a very Happy Christmas and a safe and prosperous New Year.

**NEWSLETTER EDITOR
MRS CAROL CAREY**

UPCOMING EVENTS

2003

**AUSTRALIAN RESUSCITATION COUNCIL
QUEENSLAND BRANCH**

“FIRST RESPONDER - THE MISSING LINK”
Brisbane, 15-17 May 2003
(Tess Brophy Lecture and Conference Welcome 15th May,
Social Dinner Dance on Friday evening.)

Following the outstanding success of their inaugural Basic Life Support conference (First Responder - Myths, Facts and Dilemmas'), the Queensland Branch of the ARC is doing it again in 2003.

"The 2003 conference will again focus on Basic Life Support and will have the theme of First Responder - The Missing Link" said Dr Karen Theobald ARC's Queensland Chairman. "We were thrilled with the achievements of the first conference and now is the time to do it again" she added.

The conference will examine all aspects of the first responder, including resources, community engagement, tasking, initial and on going training. It will examine the differing needs of communities and first responders in terms of geography, demographics and culture. Like all previous ARC conferences this one will also be a showcase for contemporary resuscitation and first aid research, equipment and practices.

For further details please contact:
Mr Peter Parmenter
pparment@emergency.qld.gov.au
(07) 3247 8284, Mobile: 0412105678

**AUSTRALIAN RESUSCITATION COUNCIL
SOUTH AUSTRALIAN BRANCH**

“STEPS TO SURVIVAL 2”
12th April, 2003
9am to 5pm
Sturt Campus of Flinders University,
Bedford Park SA
(registration fee not confirmed)

The conference will include various specialist speakers on a wide range of BLS topics including: the pre-hospital emergency management of:

- acute cardiac and respiratory problems
- stroke and DVT
- road trauma & head injuries
- burns & scalds and heat & cold injuries
- diabetes and seizure emergencies
- envenomations

For initial enquiries or to be placed on the mailing list for registration forms, please contact:
Ella Tyler on (08) 8278 2734 or
email to ellat Tyler@msn.com.au

2005

5th International Spark of Life Conference -
Hilton Hotel
Adelaide, South Australia
15-16 April, 2005
(Workshops Thursday 14th April)
