

KIDS SAVE LIFE

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ABSTRACT

The Kids save lives statement recommends annual Basic Life Support (BLS) training for school children. Based on the existing evidence the joint-statement “Kids save lives” was released. Schools are ideal laboratories to teach the population about basic techniques that comprise BLS considering that adolescents are usually able to perform chest compressions with the same efficacy as adults and are usually present at the scene of a medical emergency, such as homes, malls, airports, stadiums etc. CPR education in schoolchildren successfully increases their CPR knowledge and skills, and strengthens their self-confidence in helping out-of-hospital cardiac arrest patients. BLS training has been established as part of the school curriculum in Sweden, France, Denmark, Norway, parts of the United States and, more recently, in the United Kingdom. If school children receive such training, they are also likely to teach this to their family at home – and they themselves will never forget. We will see not only an increase in the number of cardiac arrest survivors worldwide, but also the social benefits of enthusiastic and positive young people. They learn to help others. Sudden cardiac death is one of the most frequent preventable causes of death in the industrialized world. In countries with organized emergency medical services, more lives could be saved by increasing the lay bystander resuscitation rate.

Key words: Kids, save life.

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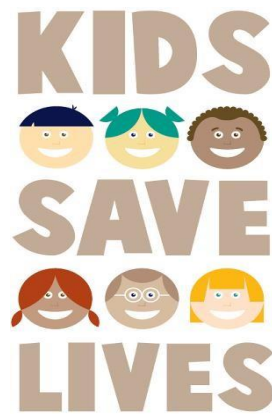
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INTRODUCTION

This statement highlights the importance of teaching CPR to all school children around the globe. The early CPR can improve the survival outcomes following sudden cardiac arrest (SCA) an issue that causes 2,000 deaths worldwide every day. The most important measure to improve survival from cardiac arrest with good neurologic function is the immediate start of cardiopulmonary resuscitation (CPR) procedures by bystanders. Following cardio-pulmonary arrest and no blood flow, the brain can survive for only 3 to 5 minutes without any damage; however, emergency medical service systems anywhere in the world likely will not arrive until more than 6, 8, 10, or more minutes have passed, depending on the country, system configuration, geography, and other factors. Consequently, in almost all cases, emergency medical services come too late for those with outside of hospital cardiac arrest. By introducing CPR teaching for all children over 12, the WHO believes that sudden cardiac arrest survival rates would improve and in turn lead to improved global health.

The Kids save lives statement recommends annual Basic Life Support (BLS) training for school children. Based on the existing evidence the joint-statement "Kids save lives" was released. The statement aims to introduce annual CPR training in the curriculum for all school children world-wide and was endorsed by the World Health Organization in January 2015. Outside hospital cardiac arrest is more frequent than intra hospital arrest, being one of the main causes of death in the world. The chance of survival is related to the etiology of cardiac arrest. When the cause is clinical (non-traumatic), survival varies between 5% and 10%. When the victim in an Outside hospital environment receives immediate assistance from lay people trained in cardiopulmonary resuscitation (CPR), survival increases to 40%. The training of lay people, including children, increases the survival of cases in cardiac arrest. Let's create the next Generation of Heart savers by giving students the opportunity to learn CPR and creating more qualified lifesavers in our communities.

Schools are ideal laboratories to teach the population about basic techniques that comprise BLS considering that adolescents are usually able to perform chest compressions with the same efficacy as adults and are usually present at the scene of a medical emergency, such as homes, malls, airports, stadiums etc. CPR education in schoolchildren successfully increases their CPR knowledge and skills, and strengthens their self-confidence in helping out-of-hospital cardiac arrest patients. "All citizens of the world can save a life". With these words, the International Liaison Committee on Resuscitation (ILCOR) is launching the first global initiative - World Restart a Heart (WRAH) - to increase public awareness and therefore the rates of bystander cardiopulmonary resuscitation (CPR) for victims of cardiac arrest. In order to achieve this goal, schoolchildren education in CPR ("KIDS SAVE LIVES"), many other initiatives have already been developed in different parts of the world.

BLS training has been established as part of the school curriculum in Sweden, France, Denmark, Norway, parts of the United States and, more recently, in the United Kingdom. Early adopters of such programs have some of the highest bystander CPR and survival rates internationally, indicating that educating children is a successful way to reach the entire population. For example, in Denmark, the rate of bystander CPR nearly doubled 5 years after CPR training was introduced into schools, with a threefold improvement in survival following OHCA over 10 years. If schoolchildren receive such training, they are also likely to teach this to their family at home – and they themselves will never forget. We will see not only an increase in the number of cardiac arrest survivors worldwide, but also the social benefits of enthusiastic and positive young people. They learn to help others.

Why Introduce Resuscitation Training During School Education

- All groups of society can be reached. To achieve a statistically significant increase in the resuscitation results, it has been estimated that at least 15% of a population need to be trained and such numbers cannot be achieved by offering voluntary courses.
- Access to health-related information is often less adequate in the lower social groups, with the result that more cases of unsuccessfully treated cardiac arrest per capita occur in socially disadvantaged areas.
- A sense of responsibility can be firmly established at an early stage. Social skills – particularly if they are to be effective across social barriers – need to be established at an early point in the course of a child's education.
- Altruism research has shown that schoolchildren have a less inhibited approach to resuscitation training while they are still pre-pubertal. Furthermore, the strongest factor inhibiting the taking of practical action in the real-life situation is a fear of making mistakes. This aspect of implementation can also be communicated much more naturally and easily during school time.
- The response to instruction is easier and better at a younger age. A more favorable attitude to learning is also reflected by the fact that practical training can be communicated in a more positive way.
- Embedding resuscitation in related school subjects such as biology, sports or health education is meaningful and possible.

CONCLUSION

Sudden cardiac death is one of the most frequent preventable causes of death in the industrialized world. In countries with organized emergency medical services, more lives could be saved by increasing the lay bystander resuscitation rate. Providing resuscitation training in schools has measurable effects, and by a "multiplier effect" it can increase the lay bystander resuscitation rate and the survival rate. Lay people cannot do anything wrong – the only wrong thing would be to do nothing. It can easily be done by everyone, saving hundred thousands of lives each year all over the world.

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