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EL SISTEMES DE COMPRESSIÓ MECÀNIQUES EN LA PARADA CARDÍACA EXTRAHOSPITALÀRIA - UNA INDICACIÓ DE BODY-TAC?

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Mechanical chest compression devices have seen increased use in recent years for patients suffering from an out of hospital cardiac arrest (OHCA).

Five large post product placement studies, found equivalent results comparing the outcome of patients with those treated with manual cardiopulmonary resuscitation but little is known about the traumatic complications they can cause or their daily use treating OHCA.

We analyze the experience since the introduction of these devices in the emergency system of our province by describing the efficacy and security

Between January 2016 and August 2017, 67 patients with a diagnosis of out-of-hospital cardiac arrest were identified. Eleven patients (16%) received mechanical compressions (1 with Autopulse® and 10 with LUCAS®) and 56 patients (84%) received manual compressions.

A significantly higher incidence of traumatic injuries was detected in patients resuscitated with mechanical compression systems. (91% vs 20.3%, $p < 0.001$). This group had longer ROSC times (mechanical group: 48.3 ± 26 minutes, Manual Group: 22.4 ± 17 minutes ($p < 0.001$) with no significant difference in CPC or survival at discharge.

Systematic use of imaging tests at admission may be a reasonable option to detect the presence of potentially serious complications.