

Children need conventional CPR; black and Hispanic children more likely to get Hands-Only

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While compressions-only or Hands-Only CPR is as good as conventional CPR for adults, children benefit more from the conventional approach that includes rescue breaths. But black and Hispanic children are more likely to receive the compressions-only method, according to research presented at the American Heart Association's Scientific Sessions 2016.

Last year, Philadelphia researchers reported that bystander CPR on kids has increased and this year they report the comparison between conventional CPR attempts and Hands-Only attempts.

Using a large national registry in the United States, researchers examined the outcomes of out-of-hospital cardiac arrests in [children](#) 18 years and younger. Of 1,458 arrests treated with bystander CPR between 2013-2015, 49 percent of children received conventional CPR, 50 percent were given compressions-only CPR, and 1 percent had ventilation-only CPR. Among the findings:

- Compressions-only CPR was used more often in black children (56 percent) and Hispanic children (64 percent) than in white children (49 percent).
- Although [black](#) children were more likely to receive compressions-only CPR, their survival was better if they received conventional CPR.
- Conventional CPR was associated with a 60 percent better

chance of survival and a 50 percent better chance of being discharged from the hospital with good brain function.

- Infants were more likely to receive conventional CPR, and that approach improved their survival more than compressions-only CPR.
- Overall, survival was 17 percent for conventional CPR and 14 percent for compressions-only CPR.

The American Heart Association recommends conventional CPR (compressions and rescue breaths) for infants and children, but if rescuers are unwilling or unable to deliver breaths, they should perform compressions-only CPR.

Provided by American Heart Association

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