

Racial gap in survival after in-hospital cardiac arrest narrows

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There has been a substantial reduction in racial differences in survival after in-hospital cardiac arrest, with a greater improvement in survival among black patients compared with white patients, according to a study published by *JAMA Cardiology*.

Large [racial differences](#) in survival exist for in-hospital cardiac arrest. During the past decade, survival has improved markedly at hospitals participating in Get With the Guidelines-Resuscitation (GWTG-Resuscitation), a national quality improvement program for in-hospital resuscitation. However, whether improved trends in survival have benefited black and white [patients](#) equally has remained unknown.

Saket Girotra, M.D., S.M., of the University of Iowa Carver College of Medicine, Iowa City, and colleagues conducted a study that included 112,139 patients from the GWTG-Resuscitation registry from January 2000 through December 2014 with in-hospital cardiac arrest who were hospitalized in intensive care units or general inpatient units.

Among the patients 27 percent were black and 73 percent were white. Risk-adjusted survival improved over time in black (11.3 percent in 2000 and 21.4 percent in 2014) and white patients (15.8 percent in 2000 and 23.2 percent in 2014, with greater survival improvement among [black patients](#). A reduction in survival differences between black and [white patients](#) was attributable to elimination of racial differences in acute resuscitation survival (black individuals: 44.7 percent in 2000 and 64.1 percent in 2014; white individuals: 47.1 percent in 2000 and 64

percent in 2014). Compared with hospitals with fewer black patients, hospitals with a higher proportion of black patients with in-hospital cardiac arrest achieved larger survival gains over time.

The study notes some limitations, including that participation in GWTG-Resuscitation is voluntary, and the results may not be generalizable to nonparticipating hospitals.

"Further understanding of the mechanisms of [the improvement found in this study] could provide novel insights for the elimination of racial differences in survival for other conditions," the authors write.

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