

Newsletter

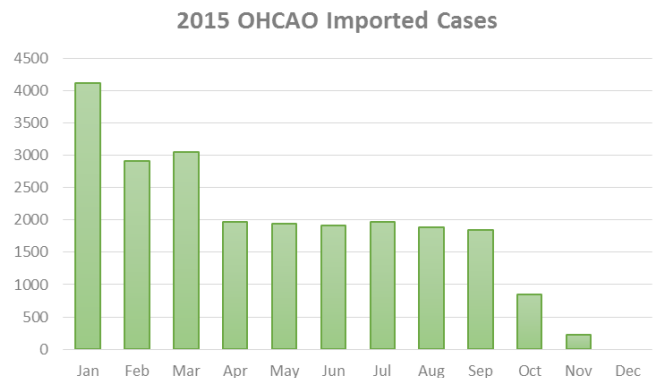


Issue 12: April 2016

Out of Hospital Cardiac Arrest Outcomes 83,201 cases now imported!

2015 data – progress so far

The OHCAO team would like to say a big thank you to all the Ambulance Services for their continued support in submitting their 2015 data. As of 12th April 2016, we have a total of 22,698 imported cases, consisting of 71 months' worth of data from 9 Ambulance Services. Please keep up the good work! We are aiming to have a complete 2015 data set by the end of August 2016 so that analysis of the data set can commence.



Reminder: Please ensure all the cases you import are eligible for the study. The inclusion/exclusion criteria are:

Inclusion criteria:

1. Out of hospital cardiac arrest
2. Resuscitation is attempted (Advanced or Basic Life Support) commenced/continued by ambulance service.

Exclusion criteria:

1. Arrest during inter-hospital transfer or on acute NHS hospital trust premises
2. Patients with clear evidence of death defined by the Joint Royal College Ambulance Liaison Committee (JRCALC) Recognition of life extinct (ROLE) criteria.

Current research using the OHCAO registry

As we are now in the second phase of the OHCAO project, we felt it would be a good time to update you on the research that is currently being undertaken by the team using the registry data.

1: Evaluating the effectiveness of national initiatives to strengthen the chain of survival

Bystander CPR (B-CPR) more than doubles the chances of survival from OHCA, yet data indicates that it is undertaken on average in only 40% of cardiac arrests. A number of national campaigns and local initiatives have been initiated to raise awareness of the problem. We are aiming to evaluate the effectiveness of these programmes, looking specifically at the community initiatives, and explore if there is a relationship between the distribution and activity of the various campaigns.

2: Targeted bystander CPR initiatives

The community in which a person sustains an OHCA has an important influence on the likelihood that they will receive B-CPR and ultimately survive. Previous research has shown that people who live in deprived areas are more likely to have OHCA, less likely to receive CPR, and subsequently have a very low likelihood of survival. We are planning to use the OHCAO registry to identify characteristics associated with high frequency of cardiac arrest and low uptake of B-CPR in order to identify areas for future targeted community campaigns.

OHCAO at National Ambulance Service Audit & Research Steering Group Meetings

The OHCAO team will be presenting an update on the project and our current research at the National Ambulance Service Clinical Audit and Research Steering Group meetings on 19th May 2016 in London. We will also be providing lunch at the event and look forward to catching up with those of you who will be attending the meetings and answering any questions you may have.

EuReCa ONE update

EuReCa ONE is a prospective observational study that aims to provide a one-month snapshot of the epidemiology, treatment and outcome for OHCA patients across 27 European countries in 2014. UK data was provided by the English Ambulance Services. The data has now been analysed and a 1st draft of EuReCa ONE publication has been completed and circulated to the National Co-ordinators for comment.

We will update you further when the results are publically available.



Coming soon – website changes



- An update to the OCHAO web application will be going 'live' soon. This is the User interface that Ambulance Services log into to import their data
- The system update will allow Ambulance Services to review the quality of their data (% of valid, missing and out-of-range values) before the data is imported, allowing them to make changes to improve overall data quality

The OHCAO team will be in contact soon to update you on how to navigate the new web application.

Changes to site teams?

If any of the clinical audit team who work on the OHCAO project, or the Medical Director or other staff member who is acting as the project's Principal Investigator leave their post for pastures new, can you please remember to inform the OHCAO team via email to OHCAO@warwick.ac.uk

This will allow us to update the site files and delegation forms, as well as the appropriate approvals and protocol amendments; secure web site access and email contact lists. Thank you!

Please contact the OHCAO project team at Warwick Clinical Trials Unit on email
OHCAO@warwick.ac.uk