

Benefit of Running-mate Knowing Cardiopulmonary Resuscitation : Case of Cardiac Arrest Survival



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Introduction

Myocardial infarction is the top cause of death in Malaysia. Coronary artery disease forms 21.86% of total national deaths in 2020. We present a case of out-of-hospital cardiac arrest (OHCA) in a marathon run that received timely basic life support (BLS) and cardiopulmonary resuscitation (CPR) with good outcome.

Case Presentation

A 61-year-old gentleman with no known comorbidities, collapsed while running in a marathon event in Malaysia. Standard Charted Kuala Lumpur Marathon. Fellow runners had BLS skills and upon witnessing the incident, immediately started CPR as he had stopped breathing. CPR was performed continuously while awaiting medical team and emergency services arrival. Subsequently the medical team arrived, took over the CPR and the Automated External Defibrillator (AED) was attached. Laryngeal mask was inserted and the AED delivered a single shock. Fortunately, the patient gained return of spontaneous circulation (ROSC) after 6 minutes. Post ROSC, he woke up and self-extubated at the scene. Upon transfer to our centre, he was alert, conscious and haemodynamically stable. He denied any chest pain or dizziness prior to collapse. Comparison of electrocardiogram (ECG) readings from scene and at ED showed dynamic changes with Q waves in V2-V3 leads. He was subsequently referred for urgent Primary Percutaneous Coronary Intervention(PCI) which revealed total occlusion of Left Anterior Descending Artery. He recovered well post PCI.

Discussion

Timely basic life support and CPR in OHCA is important for patient's survival. This case demonstrates the advantages of having fellow runners in marathon events knowing basic life support and early response saving this patient life.

Conclusion

In the event of cardiac arrest, fast intervention and preservation of chain of survival determines the outcome. CPR should be mandatory skill for all marathoner.

Keyword

Out hospital cardiac arrest, marathoner

Reference

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