



CARDIOPULMONARY RESUSCITATION – CPR Understanding CPR and the Hospice Patient

CPR is cardiopulmonary resuscitation. CPR is an emergency procedure that is performed when a healthy person's own breathing or heartbeat have stopped due to drowning, electrocution or from a traumatic event like a car accident or shooting. CPR combines **assisted breathing** and **chest compressions** which includes applying 80-100 pounds of pressure to the chest, at least 2 inches deep. This helps that heart start to pump blood through the body.

Does it hurt?

The person who receives CPR usually is not conscious and may not perceive pain. However, after the fact, the person may feel pain due to broken ribs, damage to the liver or abrasion in the throat from a tube used to keep the airway open.

There is significant research in the area of performing CPR on someone with a life limiting illness or who is nearing end of life; it significantly *worsens* the comfort, quality of life, and dignity of all involved.

What is the success of CPR in the General Population?

Success in CPR means that the patient regains the same mental and physical function as before the heart stopped. The success rate of CPR depends on where it is done, how quickly it was initiated, the cause of the heart failure and how sick the patient is.

- CPR has a 2-30% success rate when done outside the hospital in a young, healthy person.
- CPR has a 6-15% success rate when done in a hospital.
- CPR has a less than 5% success rate for elderly patients with medical problems.
- CPR has a 1-2% success rate for those folks living in nursing homes/Long-Term Care facilities.

Is CPR successful in hospice patients?

CPR survival in patients with a preexisting life-limiting condition has poor outcomes and poor survival. Admittedly, it is difficult to withhold heroics when the alternative is death, but the dismal outcomes associated with CPR in advanced illness (and the associated trauma) pose strong arguments against CPR under these circumstances.

When choosing whether or not to have CPR or to allow natural death, it is important to understand that the chances of a hospice patient successfully surviving CPR are very low. If the patient or their family feels strongly that they want to pursue attempts at CPR in the event that the patient's heart and/or lungs stop, please be aware that Pikes Peak Hospice does *not* have a cardiac defibrillator. In the event the patient's heart/lungs stop working and the patient has



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chosen “Full Code Status,” Pikes Peak Hospice staff will initiate basic life support (e.g. assisted breathing/chest compressions) and call 911.

Most people do not have the grim statistics about CPR. They get their information watching TV, where many successful CPR outcomes are shown. Families may want to choose CPR because they feel it will give the patient more time, or that not receiving CPR means they don't care, or maybe the patient won't get care. This is not the case. A “do not resuscitate” (DNR) means just that, in the event that your heart stops naturally, you **do not want** medical interventions. In allowing a natural death without CPR, hospice patients will receive comfort care and be free of distressing symptoms.

Please discuss this information with a member of your Care Team if it causes you concern or if you have other questions.

Need more information or help? Call 633-3400 24 hours a day, 7 days a week to get live help. Thank you for letting us help care for you and your loved ones.