

Cardio-Pulmonary Resuscitation (CPR):

A Decision Aid For

Patients And Their Families

The goal of this pamphlet is to help you participate in the decision about whether or not to have cardio-pulmonary resuscitation (CPR) if your heart stops.

CPR treatment decision process: An overview

1. What is CPR?
2. Why is the healthcare team asking me about CPR?
3. What happens during CPR?
4. What happens if I decide not to have CPR?
5. What matters most to me when I consider this decision?
6. Who should I talk to about my preference for CPR?
7. What will happen after I speak to the team about CPR?
8. In summary
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1. What is CPR?

Cardio-pulmonary Resuscitation (CPR) is the term used to describe the treatments used to try to restart a person's heart after it has stopped beating. CPR was initially developed to restart the heart after a sudden unexpected heart attack. Later it was used in all situations where someone's heart stopped and in many of these situations CPR was not successful. With experience, we now have a better understanding of who is likely to benefit from this treatment.

The heart may stop beating due to unexpected or expected reasons.

- Unexpected circumstances would include drowning or traumatic injury in an otherwise healthy person.
- Expected circumstances that would cause the heart to stop would include serious illnesses such kidney failure, pneumonia, severe infection or terminal cancer. These diseases can indirectly affect the heart.

This decision aid is for people who have serious illnesses. Patients and families should be aware that CPR can only, at best, bring the patient back to how they were before their heart stopped. CPR cannot improve any of the illnesses that caused the heart to stop.

2. Why is the healthcare team asking me about CPR?

- Your healthcare team wants to ensure that your thoughts about important medical decisions are taken into account when planning your care.
- The discussion about CPR may occur even if your health is good right now.
- You and your family should be active participants in the decision-making. CPR is a treatment decision made with the team and your input is crucial. But, just as a surgeon would not operate without first discussing surgery and obtaining informed consent from the patient, doctors should not decide about resuscitation without your input and opinions.

3. What happens during CPR?

If a person's heart stops while he/she is in hospital and the decision is made to attempt CPR:

- An emergency call goes out to a team of made up of doctors, nurses and other professionals.
- They rush to the patient's room and begin to push hard and fast on the patient's breastbone to keep the blood circulating around the body. It is possible to cause broken bones from pushing down hard on the chest during CPR and sometimes a patient will experience a punctured lung.
- They put a breathing tube through the mouth to the lungs and blow air into the lungs. Sometimes the patient's brain may still not receive enough oxygen during the time the team try to restart the heart.
- They may use medicines and electric shocks (cardio version) to try to restart the heart.

- If the heart is successfully restarted, then the patient is transferred to the Intensive Care Unit and placed on life support (e.g. breathing machine) while they recover.
- Surviving patients may require additional treatments and long stays in hospital before they fully recover.

You may have seen resuscitation such as this on television programs, although in real life it may not be the same. Certainly, CPR is not always successful in restarting the heart even though it commonly is on television.





4. What happens if I decide not to have CPR?

If you decide not to have CPR, it will not affect other parts of your care. Some patients who are seriously ill may decide that they still want other treatments to cure their disease or they may want life support treatments in an intensive care unit. Antibiotics, intravenous fluids or other medical treatments may be needed and wanted. You can discuss other decisions like these with your healthcare team. Staff will continue to focus on helping you to stay as comfortable as possible while providing the care you need and want.

If a person decides not to have CPR, then when their heart stops beating they will die. They will become unconscious within a few seconds because there is not enough blood going to their brain. They are not aware of what is happening and do not experience pain. The team will focus on treating the patient with dignity and supporting family and friends in their grief.

5. What matters most to me when I consider this decision?

The information presented below is based on a thorough review of the scientific literature. Blocks of 100 faces show a 'best estimate' of what happens to 100 people who choose different options in the decision about CPR. Each face ☺ stands for one person. The shaded areas show the number of people affected. There is no way of knowing in advance whether your heart will stop or what will happen to you if you have CPR.

| | ✓ Have CPR | ✗ Decline CPR |
|---|---|--|
| <p>Staying alive longer Some patients want to have CPR to stay alive longer, even with the small chance of survival. People might have unfinished business that they would like time to attend to, for example they want to see a child married or get their affairs in order.</p> | <p>About 5 patients will survive out of every 100 patients who have CPR when their heart stops. This means that 95 people who receive CPR die.</p> <p>It is not possible to know what will happen to you if you have CPR.</p>  | <p>If you do not have CPR when your heart stops, then you will die.</p>  |
| | ✓ Have CPR | ✗ Decline CPR |
| <p>Serious Brain Injuries Some patients who survive CPR live with serious brain injuries like paralysis, speech, memory, language, and personality problems. This means that they need a lot of care from family and/or caregivers. For some patients, the risk is acceptable and they may feel that nothing is worse than death itself. Others do not want to live with disabilities, especially with serious brain injury.</p> | <p>About 5 patients will survive out of every 100 patients who have CPR when their heart stops. So about 95 people who receive CPR die. Of the 5 who survive 2 will have serious brain injuries.</p> <p>It is not possible to know what will happen to you if you have CPR.</p>  | <p>If you do not have CPR when your heart stops, then you will die.</p>  |

Now mark ✓ how much each reason matters **to you** on a scale from 0 to 5. '0' means it is **not** important to you. '5' means it is **very** important to you.

| How important is it that you or your family member... | Not Important | | | Very Important | | | Option to consider if this is important to you |
|---|---------------|---|---|----------------|---|---|--|
| | ① | ① | ② | ③ | ④ | ⑤ | |
| ...Stay alive longer? | ① | ① | ② | ③ | ④ | ⑤ | ✓ Have CPR |
| ...Avoid serious brain injury? | ① | ① | ② | ③ | ④ | ⑤ | ✗ Decline CPR |

6. Who should I talk to about my preference for CPR?

- Studies have shown that doctors do not always have discussions with patients in hospital about this treatment decision. Your healthcare team may not have approached you about this important decision yet. Please think about asking your team to discuss this with you.
- It is important that you discuss your thoughts, concerns, and wishes with your family or substitute decision-maker. They need to understand your preferences in case they have to make health decisions for you if you are too ill to speak for yourself.
- We encourage you to share this document with your family.
- If you change your mind about the decision concerning CPR, be sure and let your family and someone on the health care team know so that they can honor your preferences. Your new decision can be discussed and documented on your chart.

7. What will happen after I speak to the team about CPR?

Your decision will be written in your hospital chart to guide the team if your heart were to stop.

Remember, if you decide not to have CPR, it will not affect other parts of your care. Some patients who are seriously ill may decide that they still want other treatments to cure their disease or they may want life support treatments in an intensive care unit. Antibiotics, intravenous fluids or other medical treatments may be needed and wanted. You can discuss other decisions like these with your healthcare team. Staff will continue to focus on helping you to stay as comfortable as possible while providing the care you need and want.

8. In summary

| | ✓ Have CPR | ✗ Decline CPR |
|-------------------------------|--|--|
| What's Involved | <ul style="list-style-type: none"> • Chest compressions • Electric shocks to restart heart • Tube down throat to assist with breathing • Intensive Care Unit stay and breathing machine and other medications to stabilize heart and lungs if resuscitation is successful | <ul style="list-style-type: none"> • Patients receive treatment to control symptoms • Other medical treatments (e.g. antibiotics, ICU admission) may be given depending on treatment choices |
| Possible Advantages | <ul style="list-style-type: none"> • May prevent immediate death • Small chance of returning to near previous function • Small chance of returning home from hospital | <ul style="list-style-type: none"> • Deciding ahead of time means families have time to consider this choice. Less distress for family members at time of cardiac arrest |
| Possible Disadvantages | <ul style="list-style-type: none"> • High rate of stroke and brain injury • Risk of broken breast bone or ribs and bruised lung • Does not improve other health issues that caused your heart to stop even if successful at resuscitation • Possible need for significant care from family members in order to return home | <ul style="list-style-type: none"> • Death occurs at time of cardiac arrest |

9. If you have other questions that need answering?

If you have questions or concerns about the CPR decision or the information provided in this pamphlet, please feel free to discuss it with your healthcare team. Your family doctor, family, and friends may also have helpful perspectives.

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