

Outcomes After Out-of-Hospital Cardiac Arrest Treated by Basic vs. Advanced Life Support

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Information obtained from this article indicates that outcomes for out of hospital interventions for cardiac arrest patients were more favorable for the patients treated by Advanced Life Support (ALS) compared to those treated by Basic Life Support (BLS). Considering pre-hospital practices, this article encourages medical interventions for out of hospital cardiac arrest patients being carried out by ALS. Using a nationally representative sample, Sanghavi *et al.* (2015) observed more remarkable survival to discharge rates among patients who received BLS. Similarly, BLS is associated with poor neurological function, consequently explaining the higher mortality rates within the first few days after an arrest. For this reason, the article advocates for ALS treatments.

It is believed that the data obtained from this study could be limited because the authors applied a somewhat different approach to research and analysis, which was primarily based on billings for the level of the EMS response; as opposed to conducting a meta-analytical analysis of clinical records of presentation and treatment at the scenes. In a sense, the study participants were biased in that they were drawn from traditional Medicare beneficiaries. Administrative claims from Medicare were subject to inaccuracy and incorrect coding in diagnoses and procedures. Observably, it is possible that there could be a difference in the EMS services across areas. Also, the study indicated unknown downtime for the OOHCA patients receiving BLS care. Arguably, BLS spent less time at the scene, suggesting that BLS interventions were more superior than ALS.

The primary aim of this article is to highlight some of the beneficial impacts associated with BLS, arguing that BLS may lead to worse outcomes in cardiac arrest patients. The study also calls for a widespread acceptance of ALS as a favorable treatment for out of hospital cardiac arrests patients due to rapid transport services and advanced significant chest compression.

References

Sanghavi, P., Jena, A. B., Newhouse, J. P., & Zaslavsky, A. M. (2015). Outcomes after out-of-hospital cardiac arrest treated by basic vs. advanced life support. *JAMA internal medicine*, 175(2), 196-204.