



CPR and the elderly – know the risks



KNOW THE FACTS

Seniors need to know the facts before making a decision about CPR and if it is the right choice.

This doesn't mean that CPR isn't a valid choice for you.

It simply means that it's important to understand the facts and realistic outcomes before making a choice.

In a recent study, when older adults over 85 years old were made aware of their chances of survival after CPR, only 6% chose to have CPR if they went into cardiac arrest.

CPR is most successful if the heart stops because of a condition, such as a heart attack, that affects the normal beating of the heart. Younger patients who are otherwise healthy are more likely to benefit from CPR if this happens to them.

When death finally comes as the result of advancing age or chronic illness, the heart stops beating and breathing stops as part of the dying process. Under these circumstances, CPR is of no benefit, and instead adds indignity and pain to the final moments of life.

TALK TO YOUR DOCTOR

You and your family should ask your doctor about the risks, benefits, and realistic post-CPR quality of life before making a decision.

CPR is one of the few treatments that residents have to choose not to do – it's part of the standard protocols used by hospitals and emergency responders.

If you decide not to have CPR, talk to your Caressant Care home's nursing staff and fill out a Plan for CPR form.

In the event of a life-threatening illness, you may need to decide if you wish to have a lifesaving procedure known as CPR performed.

This brochure will help inform you, your substitute decision maker, and your family of the risks involved with CPR and the elderly.



Caressant Care Nursing and Retirement Homes Limited.

WHAT DOES CPR STAND FOR?

CPR stands for Cardiopulmonary Resuscitation. If a person stops breathing, or their heart stops beating effectively, this lifesaving technique is used to restore oxygenated blood flow to the vital organs. This is accomplished by providing chest-compressions to pump blood through the body, and/or the giving of breaths to oxygenate the blood being pumped.

CPR HARD ON SENIORS

An important end-of-life consideration for seniors is whether or not they would want to have CPR if their heart stops beating or if they stop breathing.

Contrary to how this procedure is portrayed on popular TV shows, in real life, the CPR process is brutal and survival rates are low. You, or your substitute decision maker, may be asked if you wish to have CPR performed in the event of cardiac arrest.

Before making a choice about CPR, it's essential for seniors to know the risks, benefits, and their chance of recovery.

HOW CPR REALLY WORKS

When someone experiences sudden cardiac arrest, their heart stops and they may stop breathing. CPR is used to stimulate the heart by pushing down into the chest at least 2 inches deep and at least 100 times per minute. Sometimes, air

is forced into the lungs. Then, an electric shock from a defibrillator (if sent to hospital, not available in our LTC homes) is sent to the heart to try to get it to beat again. If CPR is successful, all that pounding on the body usually results in major physical trauma.

This trauma often includes broken ribs, lung bruising, damage to the airway and internal organs, and internal bleeding.

CPR RISKS FOR SENIORS

Along with the physical trauma, residents who receive CPR also have to deal with serious long-term consequences such as possible brain damage from oxygen deprivation.

Older bodies are physically weaker and less likely to recover from the CPR itself. In addition, the existing health conditions that caused heart failure in the first place make it even less likely that they'll recover at all or have reasonably good quality of life. Because of all this, some argue that using CPR on seniors can lead to an unnecessarily prolonged and painful death.



WHAT ARE THE SURVIVAL RATES?

Research based on numerous studies across North America suggest that only 10-20% of all people who receive CPR will survive. For chronically ill elderly residents, the percentage is much lower at less than 5%.

And what about quality of life after CPR? Making a meaningful recovery from the cardiac arrest and the damage caused by CPR will be very difficult for seniors with existing health conditions, particularly those living in long term care.