

Free instruction offered

CPR: It can be a lifesaver

By LINDA TAYLOR

You're standing in line at the grocery store. The woman in front of you collapses. She has no pulse or respiration. What can you do?

If you know how to apply cardiopulmonary resuscitation (CPR) chances are good you might save her life while others merely wait for an ambulance.

CPR combines external heart massage and mouth-to-mouth resuscitation.

It has been effectively used on both adults and infants whose hearts have stopped—whether due to heart attack, stroke, drowning, choking, electrical shock or other causes.

Jennifer Pribe, a registered nurse affiliated with Henry Ford Hospital and the Michigan Heart Association, calls it basic first aid procedure.

She is one of a team of instructors who will be teaching free CPR sessions the next three Thursday evenings at Ford Hospital's three locations—West Bloomfield, Dearborn and Detroit.

"IT'S AS SIMPLE as ABC," she said.

A is for airway. After establishing that the victim is unconscious, not just sleeping, the airway must be checked for obstructions and cleared.

Place the victim on his or her back. Ms. Pribe instructed. Then place one hand under the victim's neck and the other hand under the forehead, tilting the head backward and forcing the airway open.

Next comes B—breathing.

Check for breathing. If there is still no breath, apply mouth-to-mouth resuscitation with four rapid breaths. Make sure there are no air "leaks" around the corners of the mouth or the nose.

For babies, this is often all you need. Ms. Pribe said.

If the victim does not respond, check the neck pulse.

The next step is C—compressions to simulate the heart's pumping.

Here the procedure becomes more difficult and critical.

Training is needed or you could easily break ribs or the sternum. Ms. Pribe said, reassuring that if you save the victim's life, he is unlikely to sue you for breaking his ribs.

TO FIND the proper spot to massage,

Ms. Pribe suggests: "Run your hand up the rib cage until you feel a notch. Put the heel of one hand over that and cover with the other hand. You will be pressing once a second for 15 seconds. Then, with out delay, breathe into the victim's mouth two times, filling your lungs completely before starting again."

If the victim's mouth is severely lacerated, as in the case of an automobile accident, seal the mouth and blow into the nose.

In the case of a child, an adult's mouth is placed over both the child's mouth and nose for breathing. And instead of massaging the heart with two hands, only two fingers are used.

Timing is important, not only in the pumping-breathing rhythm but in getting started also.

"Brain damage can occur in four to six minutes on an adult," Ms. Pribe explained.

If the victim has choked on meat at the dinner table, for example, and has his airway blocked, the heart can stop within a minute.

While I, weighing 100 pounds, found it difficult to administer CPR to Ford Hospital's Resucel-Annie, a lifelike mannequin with inflatable chest and equivalent to an 180-pound person, Ms. Pribe said under the pressure of an emergency situation, 90-pound nurses have successfully administered CPR to grown men.

Usually, 100 pounds of pressure is

needed to be effective on a 180-pound victim. ONCE THE patient becomes revived, CPR should be stopped.

However, Ms. Pribe advises the rescuer keep the victim's head tilted and monitor the pulse until an ambulance or doctor arrives.

Anyone in the Birmingham-West Bloomfield-Bloomfield-Troy area interested in learning CPR may register with Henry Ford Hospital for an one of three evening sessions.

Sessions will run from 7:30 p.m. Thursday, Aug. 19, at Fairlane Center, 19601 Hubbard Dr.; or Thursday, Aug. 26, at the hospital, 2799 W. Grand Blvd., Detroit.

Call Ford Hospital for reservations.

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Jennifer Pribe, a CPR instructor, shows how to clear the victim's airway. (Staff photos by Barbara McClellan)



To check for heartbeat, take a neck pulse reading, then (see below) . . .



... to find the spot for massaging, run the fingers up the rib cage till you feel a notch.



Pressure is applied by clasping the hands and pressing with the heel of the bottom hand.



Ms. Pribe instructs in mouth-to-mouth resuscitation.

Survivor favors public awareness

By MARY LOU CALLAWAY

I belong to a club—survivors of a heart attack.

As such, I am instilled in favor of everyone's learning CPR (see story above) and learning the symptoms of a person about to undergo or having a heart attack.

A month under which many persons hide is "You're not the type."

But more people are "the type" than most realize.

I did not have high blood pressure or diabetes was not overweight and no one in my family to my knowledge had heart disease.

Yet, I qualified because my cholesterol was high, I smoke and my personality is Type A—a deadline worker, perfectionist, compulsively punctual, try to do two things at once and am irritated with delays.

IT WAS NEARLY 17 months ago that I, a reporter, turned in my stories before deadline and was ready to pack for a vacation trip the next day.

I had gone to lunch with fellow reporters when suddenly I began experiencing a number of heart-attack symptoms.

A friend called my doctor, who ordered an ambulance and EKG (electrocardiogram). With siren blaring, I was taken to the hospital.

I was placed in the coronary care unit, which became cool as I joined the four men already hooked up to screens monitoring vital signs.

My belongings were put into a bag. My husband was told I wouldn't need them for three days.

It was five days before I was moved to a regular room, where my comb, toothbrush, robe and other personal things were restored.

The nurses wouldn't let me watch the life-line monitor, so I just watched the clock. My husband and daughters were allowed to visit me five minutes an hour.

GRATEFUL FOR a caring doctor who never missed a day's visit, I, however, posed endless questions. He finally admitted that my attack was neither mild nor massive, but severe.

The first bit of independence was precious—from the shower to a short walk. Now I remain true to the diet and medication and rest when I'm tired.

I was back at limited work in less than eight weeks.

As a survivor, I advise if you have even one suspicious symptom, call the fire department or have someone take you to a hospital.

The symptoms are: breathing difficulty, pain in the chest, neck, shoulder or arm, dizziness, numbness, perspiration, nausea or a combination of these.

If someone around you loses consciousness—because of a heart attack or other causes—proper application of CPR could save the life. Most police and fire personnel are trained in the technique, but it is available to the public.

As a heart attack victim, I favor everyone's knowing what to do.



A recording device indicates when sufficient pressure and air is administered to Resucel-Annie.



This spring simulates pressure needed for 180-pound person.