SSN 1447-4999

BOOK REVIEW

Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care. International Consensus on Science. Supplement to Circulation. Volume 102, Number 8. August 22, 2000.

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We are always seeking consensus about best practice management of patients in need of resuscitation. So many opinions, and the eternal search for evidence to steer our resuscitative endeavors continues to challenge the way we manage our most acutely ill patients.

This book, by its title, "*International Consensus on Science*" may well be what we have been waiting for. The American Heart Association, in collaboration with the International Liaison Committee on Resuscitation (ILCOR), has produced this superb 380-page book which should be used as a reference by all who are interested in resuscitation.

The editorial board, committees, contributors and reviewers of the book, including strong representation from the Australian Resuscitation Council (ARC), represent the "who's who" of International resuscitation, which gives this work immediate credibility. Fortunately the quality of information provided, goes beyond the reputation.

Part one defines the levels evidence employed throughout the book. This The levels are classified into five categories; class I, class IIa, class IIb, class indeterminate and class III. The categories are clearly outlined in a table in this introductory section. It would be helpful to gain a clear understanding of this section prior to moving on to the other parts of the text.

This extensive text not only covers basic and advanced cardiac life support for adults and children, but includes valuable chapters on new guidelines for first aid, the automated external defibrillator and ethical aspects of CPR and ECC.

Whilst the weight of the book is directed at primary cardiovascular emergencies, there are also brief but excellent sections on topics such as fatal asthma, cardiac arrest in trauma, and cardiac arrest in pregnancy. The section on cardiac arrest in pregnancy (apart from striking terror in most resuscitationists) provides helpful decision-making factors regarding perimortem cesarean section.

Of particular value are chapters on reperfusion both in the acute coronary syndrome and acute stroke. This comprehensive volume also includes an excellent update and critique on "From Science to Survival: Strengthening the Chain of Survival in Every Community." The appendices include three published papers explaining the evidence and rational of decisions relating to some of the important changes to previous recommendations and current practices.

Overall, for the thinking clinician involved in resuscitation, the greatest value of this “International Consensus on Science” is a genuine attempt to identify the evidence-base for every intervention recommended. The lack of Class I interventions is confronting to current practice, but is also a challenge to increase the evidence-base by stimulating relevant clinical trials and studies to “complete the tapestry” in the years ahead.

Generally, the book is well written, easy to follow, and has excellent drawings and illustrations. The list of references in this book is extensive and serves as a great resource for further reading. Many important controversies in clinical management are discussed, demonstrating cases with assigned levels of evidence.

This very important text should be readily accessible to, and read by, all emergency primary health care professionals involved in resuscitation.