

## **Out-of-hospital cardiac arrest (OHCA)**

Out-of-hospital cardiac arrest (OHCA) is a medical accidental event with high mortality and poor prognosis. Unlike other interventions, OHCA treatment requires immediate resuscitation and searching for all possible causes of cardiac arrest afterwards. After patients survive from OHCA, we must provide a series of post-resuscitation care strategies.

To improve the prognosis more effectively, we have to integrate the treatments for responses, which OHCA patients do. Facing with such critical challenges, American Heart Association (AHA) proposed a strategy for the chain of survival, including from early initiate the emergency medical services (EMS) to Recovery. Each step has its own strategies and actions to improve the survival and prognosis for OHCA patients. Clinical experts have been doing the research on the details of the steps, hoping to find the key to improve survival. Early identification of OHCA as well as dispatching personnel to guide cardiopulmonary resuscitation (CPR) can improve the survival prognosis. In addition, the skill of performing CPR and using automated external defibrillator (AED) for is strongly recommended to be an education course at school, expecting more pre-hospital OHCA patients will receive CPR and the first electric shock in a short time, and further elevating the good prognosis as a result. In-time Epinephrine injection for non-shock rhythm patients and transporting directly to cardiac arrest center (CAC) patients with shock rhythm for integrated care after high-level resuscitation. The above strategies can effectively improve the survival of OHCA. Although many researchers have spear no efforts making guidelines for OHCA prognosis, the survival rate still remains low (9% in Europe and about 3% in Asia), which also means there are still many potential factors for us to explore, discover and solve. As a result, the goal of this special issue is to help OHCA researchers to learn and develop new advanced topic in CPR education, EMS, resuscitation and post-resuscitation and improve survival of patients of OHCA.

## Out-of-hospital cardiac arrest (OHCA)

### Guest Editor

**Dr. Chien-Yu, Chien**

Ton-Yen General Hospital, Taiwan

**Interests:** Cardiac arrest, Triage system**Email:** [rainccy217@gmail.com](mailto:rainccy217@gmail.com)**Website:** [https://www.researchgate.net/profile/Cheng\\_Yu\\_Chien](https://www.researchgate.net/profile/Cheng_Yu_Chien)**Dr. Yan-Ren, Lin**

Department of Emergency and Critical Care Medicine, Changhua Christian Hospital, 135 Nanshiao Street, Changhua 500, Taiwan

**Interests:** Emergency and critical medicine, Cardiopulmonary resuscitation, Big data analysis, Biochemical engineering**Email:** [h6213.lac@gmail.com](mailto:h6213.lac@gmail.com)

### Signa Vitae is a member of



Scopus Preview

**Submission Deadline:** 16 October 2021**Submission:** <http://js.signavitae.com>**Impact Factor:** 0.338**Contact us:** [SVeditorial@signavitae.net](mailto:SVeditorial@signavitae.net)[www.signavitae.com](http://www.signavitae.com)

Signa Vitae

Print ISSN: 1334-5605

Online ISSN: 1845-206X

©2020 MRE Press. All rights reserved

