

# Decisions about CPR

What you need to know about  
Cardiopulmonary Resuscitation (CPR)



*because  
you matter*

**St Nicholas  
Hospice Care**

A Registered Charity No. 287773



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# Decisions about CPR

This leaflet provides information about cardiopulmonary resuscitation (CPR). If you would prefer to discuss CPR rather than read about it, please ask the doctors or nurses caring for you or your family member.

## What is CPR?

Cardiopulmonary resuscitation (CPR) is a technique designed to maintain the body's circulation after the heart has stopped, whilst attempting to restore normal heart function. CPR is an emergency treatment given to try to restart the heart and breathing.

Basic CPR involves inflating the lungs by 'mouth-to-mouth' breathing and repeatedly pushing down firmly on the chest. Advanced CPR involves inflating the lungs through a tube inserted into the windpipe and using electric shocks and drugs to try to restart the heart.

Nursing and medical staff and first aiders at St Nicholas Hospice Care can provide 'basic' CPR until an ambulance arrives. [St Nicholas Hospice Care cannot offer advanced CPR on its premises.](#)

## What can CPR achieve?

Like any procedure, **CPR carries some benefits but also some risks.** Statistics show it is often not successful, and even when it is, there is a risk of further complications that may dramatically reduce the quality of life afterwards. The most it can achieve is to bring the person back to how they were before the arrest occurred; it cannot improve any existing conditions.

**Therefore, CPR should only be attempted if it is considered that it may be successful.**

## What are the chances of success with CPR?

Hospital statistics show that success rates of attempted CPR for all patients, regardless of age and disease, may be as high as four out of 10. However only two of these survive to leave hospital.

Despite the best efforts of everyone involved **most attempts at CPR are not successful**, particularly those that happen at home due to the delay before advanced life support is started when the paramedics arrive. The chances of success in CPR for a patient with advanced cancer or other advanced diseases (such as severe stroke or heart failure) are virtually zero.

## How is the decision made about whether or not to provide CPR?

If you were admitted to the Hospice, the doctors would assess how appropriate CPR might be for you. You will be given the opportunity to discuss this should you wish to. Unfortunately, people with advanced cancer, motor neurone disease or other incurable illnesses generally do not have reversible or treatable causes and CPR rarely succeeds.

### When discussing CPR, you will need to consider:

- Contrary to what is shown in the media, the success rate for CPR is very low
- Even when successful, CPR is associated with a short survival
- There are 'side effects' of CPR, such as bruised or fractured ribs, requirement for artificial ventilation in an intensive care unit and brain damage
- Successful CPR is more likely in a hospital than the Hospice because access to experienced intensive care staff and equipment is quicker
- Attempting CPR at the Hospice would necessitate emergency transfer to hospital as we do not have the facilities to monitor and treat patients who have had a cardiopulmonary arrest

## Who else can decide whether to perform CPR?

If you are too ill to make a decision, the doctors and nurses will make the decision for you. Those close to you can be involved in the discussion but cannot make the final decision.

In England, no one can demand a treatment or intervention, including CPR, which the doctors believe will be unsuccessful.

## Will I be denied other treatments if CPR isn't appropriate for me or I decide not to have it?

No. You can still receive all treatments that may benefit you, such as antibiotics for a chest infection or pain relief.

## Can I change my mind?

If CPR is appropriate for you, then you can change your mind whether or not to receive it:

*I no longer wish to have CPR* – your wishes would be respected and you would not be given the treatment against your will.

*I now wish to have CPR* – this is an option as long as the doctors assess that CPR is still appropriate for you.

## Will the decision about CPR be reviewed?

The doctors will review decisions about CPR regularly. If you have opted to receive CPR and it becomes inappropriate e.g. due to your condition changing, this will be discussed with you.



If you feel that you have not had the chance to have a proper discussion with the healthcare team, or you are not happy with the discussions, please contact your GP to discuss your suggestions, worries or complaints.

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This leaflet is available in different formats upon request.  
Please contact the Marketing and Communications  
Department for further information on 01284 766133.

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