



VIEWS AND REVIEWS

CUT TO THE CHASE

Gabriel Weston: Looking out for others

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It's the annual camping trip. Every summer half term we congregate in a field with a big group of other families, pitch tents, roast a pig, and try to let go for a couple of days. Over the 10 years we've been doing this, the first aid pack I bring with me has grown as the medley of minor ailments and injuries I've had to attend to—often in the dark, with a torch—has become more elaborate. This year, however, I've realised that my most important piece of kit won't go in the bag.

Last month the *European Heart Journal* published a paper with some alarming findings. Researchers from the Netherlands, looking at nearly 6000 people, have discovered that women who have a cardiac arrest outside hospital are significantly more likely to die than men in the same situation.¹ The main reason is that women receive lifesaving defibrillation much less often, and an important factor seems to be that bystanders often don't recognise when women who collapse are having a cardiac arrest.

The authors also observed gendered differences in the way patients are subsequently treated in hospital. Women have myocardial infarction diagnosed less frequently and are less likely to receive either coronary angiography or percutaneous coronary intervention. What this amounts to is the scary statistic that, all other things being equal, the chance of a woman surviving to be discharged from hospital after having a cardiac arrest in the community is about half that of a man (12.5% v 20%).

Hanno Tan, study author and cardiologist, and his colleagues are now calling for a range of measures to tackle this problem. Top of the list is launching a public awareness campaign to

teach people that women having a heart attack may experience symptoms that are less easy to call: fatigue, fainting, and neck or jaw pain, as opposed to the more classic chest pain often reported by men.

As I check in at the campsite and note the defibrillator, in prime position above the fresh eggs and apple juice, I find that I'm less reassured by the sight of it than usual. I can see now that, whether it's the defibrillator in reception or the first aid kit squashed into my holdall alongside our other essential medical supplies (the kids' variety pack and my bottle of gin), being equipped to help someone in extremis is only partly about the equipment.

What really saves lives is a certain kind of readiness: being prepared to look outwards from one's own situation, register a problem when it arises, and then actually jump in and do something. Let's make sure that it isn't just the men getting this crucial attention.

Competing interests: I have read and understood BMJ policy on declaration of interests and declare that I have no competing interests.

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1 Blom MT, Oving I, Berdowski J, van Valkengoed IGM, Bardai A, Tan HL. Women have lower chances than men to be resuscitated and survive out-of-hospital cardiac arrest. *Eur Heart J* 2019 (published online 21 May). 10.1093/eurheartj/ehz297.

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