

A Prediction Tool for Initial Survivors of out-of- Hospital Cardiac Arrest

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background

out of hospital cardiac arrest (OOHCA)

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- major health problem
- 500.000 patients in United States and Europe /year



overall mortality: 8% - 11%







background

OOHCA has a very uncertain outcome

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- no valid outcome scoring system
- problem in giving reliable outcome estimation
- delicate decisions only based up on experience and gut feeling





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aim

- to assess the predictability of outcome after OOHCA, based on a number of observational variables
- to identify variables with high predictive power
- to assess whether a multivariate approach is superior to a univariate one
- to derive a OOHCA outcome prediction score tool





benefit



- improvement of the predictability of patient's survival would be of major medical and socioeconomic interest.
- valid outcome estimation could facilitate decision-making for persons in authority and could save medical resources







methods



- based on a cardiac arrest-registry with > 4000 patients which were resuscitated from OOHCA and which were admitted to the Department of Emergency Medicine at a large University Hospital
- multivariate logistic regression was applied on 20 variables before ROSC deemed to have high predictive power







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methods

- the framework of machine learning was chosen
- a 10-fold cross-validation was done for reliable estimates and confidence intervals
- main performance parameter was the area under the ROC curve (AUC)

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variables



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Variable name	Description	Value	Scale
sex	Sex of the patient	Male=0, Female=1	binary
age	Age of the patient	In years, at the time of cardiac arrest	metric
bmi 🦯	Body Mass Index	Weight (kg) / Size (m) Squared	metric
diabetes	Previous diagnosis of diabetes	Diabetes = 1, no diabetes = 0	binary
smoker	Patient is a smoker	Smoker=1, nonsmoker=0	binary
myocinfarct	Patient previously had a myocardial infarction	Infarction=1, no infarction=0	binary
khk	Previous diagnosis of Coronary Artery Disease	CAD=1, no CAD=0	binary
hypertension	Previous diagnosis of hypertension	Hypertension=1, no hypertension=0	binary
heartfail	Previous diagnosis of heart failure	Heart failure=1, no heart failure=0	binary
cvi	Previous diagnosis of chronic venous insufficiency	CVI=1, no CVI=0	binary
copd	Previous diagnosis of chronic obstructive pulmonary disease	COPD=1, no COPD=0	binary
opcpre	OPC score prior to cardiac arrest	Score 1 to 5	ordinal, treated as metric
nyh5pre	NYH5 score prior to cardiac arrest	Score 1 to 5	ordinal, treated as metric
noflow	Minutes between cardiac arrest and first aid (length of "no		
	flow" time)	in minutes	metric
min2srosc	Minutes between cardiac arrest and SROSC	in minutes	metric
cause	Main cause of cardiac arrest	Cardiac=1, non-cardicac=0	binary
	First aid performed by physician, family member, paramedic		
firstaid	or layman	Physician=1, non-Physician=0	binary
nodefi	Number of defibrillation shots	Count of shots	metric
adrenaline	Amount of adrenaline applied	Total amount (in …)	metric
shockable	Shockability of rhythm in first defibrillation	Shockable=1, non-shockable=0	binary
defireaction	Reaction to the first defibrillation	Not shockable=0, shockable and VT/VF (as reaction to first defi)=1, shockable and PEA=2, shockable+Asystole=3, shockable+SR/RHY/SVES/VES/AVES+ no pulse=4,	ordinal, treated as metric

shockable+pulse=5

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Data sets









witnessed

Trainingset	median	25% perceptile	75% nercentile	Percent 1	Percent 0
cov	modiall	Percentile	Percentile	27 520/	70 / 170/
300	50	40	60	27.55%	12.41/0
aye	26 12	22.00	20 22	0	0
	20.12	23.00	29.22	10 00%	
diabeles				10.20%	83.80%
smoker				30.90%	69.10%
myocintarct				12.92%	87.08%
cad				21.91%	78.09%
hypertension				32.21%	67.79%
heartfail				11.05%	88.95%
cvi				5.99%	94.01%
copd				9.74%	90.26%
opcpre	1	1	1		
nyh5pre	1	1	2		
noflow	1	0	6.5		
min2srosc	20	10	30		
cause				69.76%	30.24%
firstaid				34.18%	65.82%
nodefi	2	0	4		
adrenaline	2	0	4		
defireaction	1	Ő	2		
shockable		Ű	-	50 83%	40 17%
cnc30d	3	1	5	00.0070	40.1770
mortolity	5		5	20 900/	60 110/
monanty		050/	750/	39.09%	00.1170
Testset	median	percentile	percentile	Percent 1	Percent 0
sex			•	27.84%	72,17%
age	61	50	71		
bmi	26.23	24.11	29.41		
diabetes				20 62%	79 38%
smoker				31 62%	68 39%
myocinfarct				14 09%	85 91%
cad				24 74%	75 26%
hypertension				11 92%	58 08%
boartfail				1/ 70%	95 22%
ovi				14.1070	05.2270
cond				4.0170	90.1970
copu			0	0.03%	93.47%
opepre	/		2		
nynopre	1	1	2		
notiow	1	0	5		
min2srosc	19	12	32	00 - 101	67 4007
cause	1			62.54%	37.46%
firstaid				49.49%	50.52%
nodefi	1	0	3		
adrenaline	1	0	3		
defireaction	1	0	2		
shockable				54.30%	45.70%
cpc30d	3	1	5		
mortality				42.27%	57.73%
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Non-witnessed



	Trainingset	median	25% percentile	75% percentile	Percent 1	Percent 0
	sex				30.46%	69.54%
	age	56	41	68		
	bmi	25.94	22.86	28.72		
	diabetes				14.37%	85.63%
	smoker				27.01%	72.99%
	myocinfarct				9.77%	90.23%
1	khk				16.09%	83.91%
	hypertension				26.44%	73.56%
	heartfail				10.92%	89.08%
	cvi				4.02%	95.98%
	copd				8.62%	91.38%
	opcpre	1	1	1		
	nyh5pre	1	1	1		
	cause				43.68%	56.32%
	nodefi	1	0	4		
	adrenaline	4	2	6.5		
	defireaction	0	0	1		
	shockable				36.78%	63.22%
	cpc30d	5	5	5		
	mortality				76.44%	23.56%
	Testset	median	25% percentile	75% percentile	Percent 1	Percent 0
	sex		·	·	20.00%	80.00%
	age	54	44.5	64.25		
	bmi	26.23	23.32	28.18		
	diabetes				0.00%	100.00%
	smoker				32.00%	68.00%
	myocinfarct				4.00%	96.00%
	khk				12.00%	88.00%
	hypertension				44.00%	56.00%
1	heartfail				4.00%	96.00%
	cvi				4.00%	96.00%
	copd				16.00%	84.00%
	opcpre	1	1	1		
	nyh5pre	1	1	1		
	cause				60.00%	40.00%
1	nodefi	1	0	6.25		
/	adrenaline	4	2	8		
	defireaction	1	0	1		
	shockable				60.00%	40.00%
	cpc30d	5	1.75	5		
	mortality				68.00%	32.00%
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results



Score



Y=0.0284*min2srosc+0.0355*age-1.4608*shockable+0.1528*adrenaline

if Y < 1.3320 else if Y < 2.3129 else if Y < 3.1238 else if Y < 4.1046 else then then then then p(mortality)=0.1 p(mortality)=0.3 p(mortality)=0.5 p(mortality)=0.7 p(mortality)=0.9









Simplifed score

~	Predictor	Poir	nts	Predictor	Poir
	1 Ago group	1		2 Minutes until SPOSC	
	1. Age group		22	3. Willutes ultil SROSC	
	>80	1	32	>100min	
	>/0		27	>50min	
	>50		23	>40min	
	>60		20	>30min	
	>40	_	16	>20min	
	≤40		11	>10min	
			_	>0min	
	2. Adrenalin administered			Omin	
	>10mg		24		
	>5mg		12	4. Shockable rhythm?	
	>4mg		7	Yes	-
	>3mg		5	No	
	>2mg		4		
	>1mg		2		
	>0mg		1		
	Omg		0	Total score	
<u>.</u>		1	1		
		Total score	e	Probability for mortality	
		-			
		<13	1	10%	
	11	13-22	1	30%	
		23-30		50%	
		31-40	8	70%	
		>40		90%	

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predicted mortality



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conclusion

- currents results can improve OOHCA outcome predicitibility
- 4 variables are as good as all 20 variables for outcome estimiation
- results can serve as base for a future simple OOHCA survival prediciton score

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