

# ARE ALL SUPRAGLOTTIC AIRWAYS EQUIVALENT IN CARDIAC ARREST?

Joe Holley MD FACEP FAEMS

A series of several parallel white lines of varying thicknesses, slanted diagonally from the bottom right towards the top right, set against a blue gradient background.

**EMS Medical Director for Memphis Tennessee**

**EMS Medical Director for the State of Tennessee**

**Paragon Medical - Founder**

**DISCLOSURES**

A decorative graphic consisting of several parallel white lines of varying lengths, slanted upwards from left to right, located in the bottom right corner of the slide.

# HOW MIGHT WE ASSESS THE “EFFECTIVENESS” OF AIRWAY DEVICES?

**3 methods of CPR performed flat and head up**

**5 different SGA were compared**

**mean +/- SEM airway pressures were recorded during CPR**

# REPRESENTATIVE AUTOMATED CPR (LUCAS 2) + ITD-16

LMA

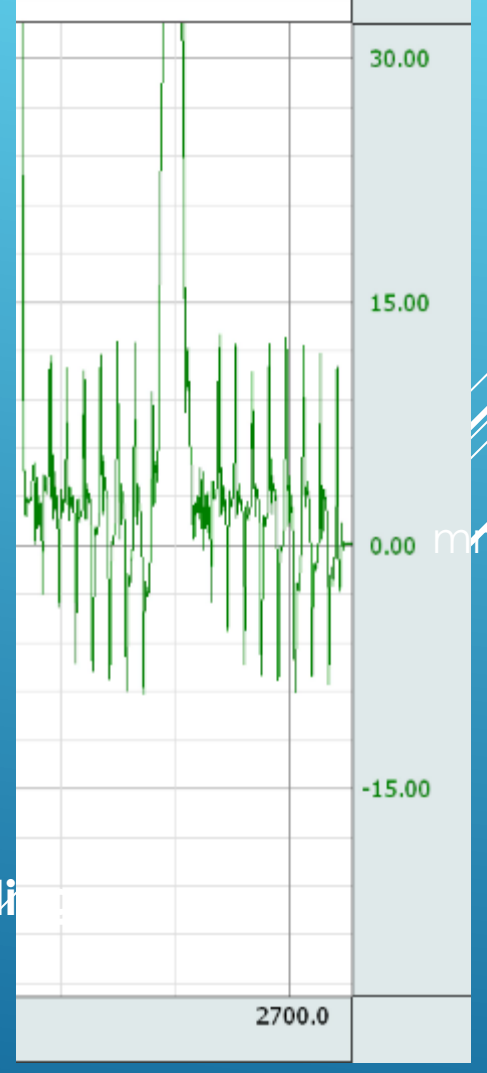
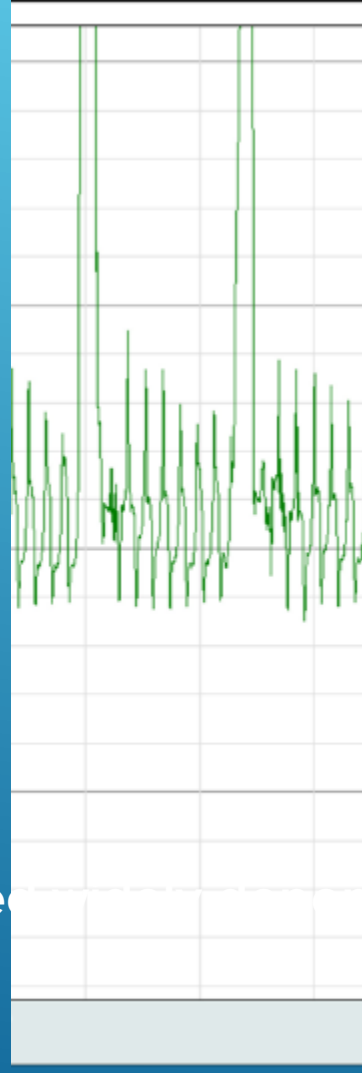
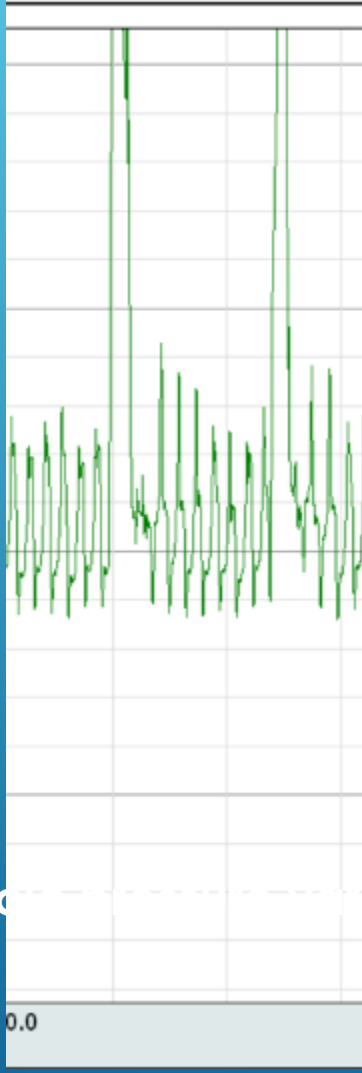
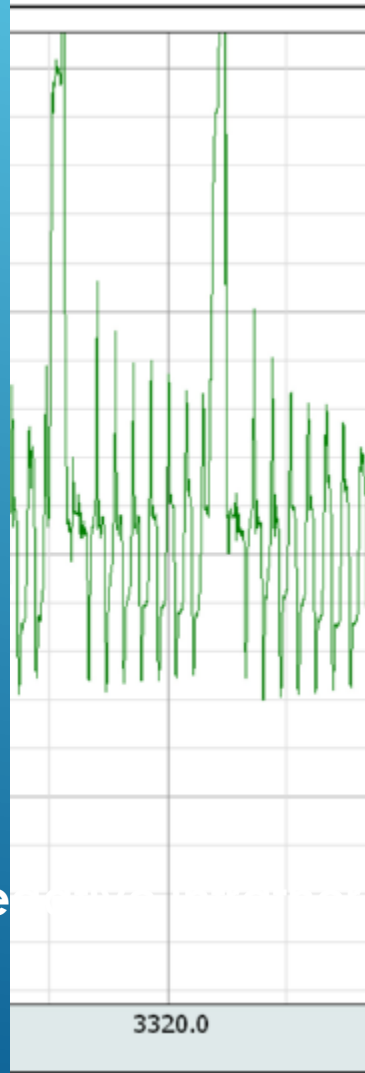
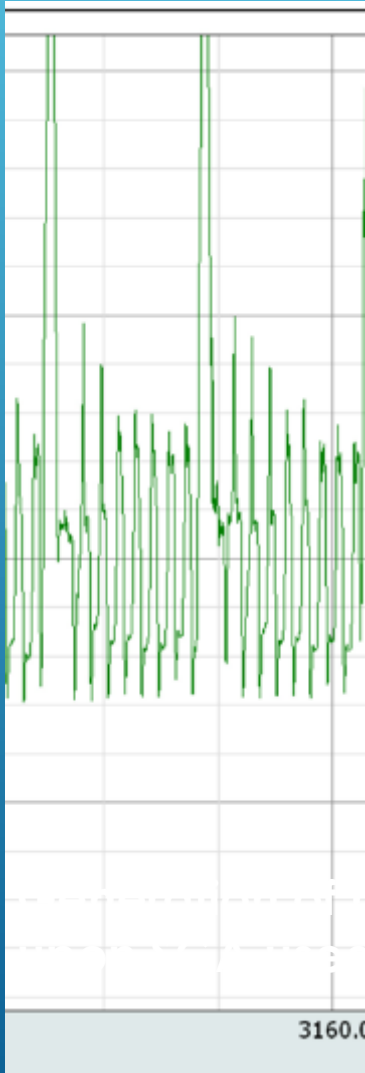
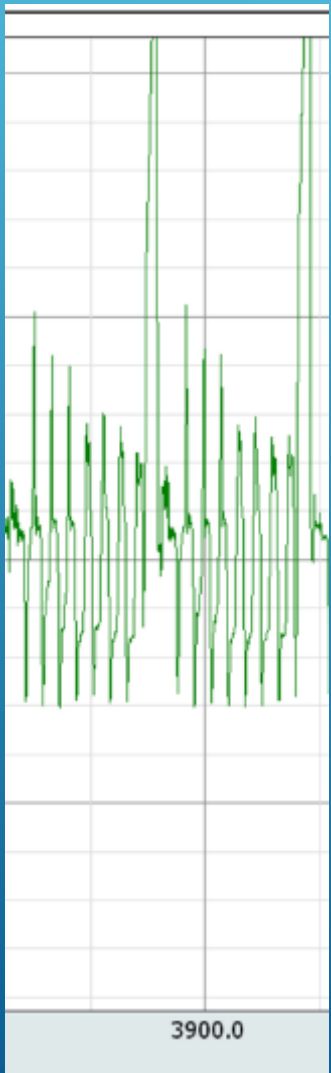
AirQ

IGel

KING

Combitube

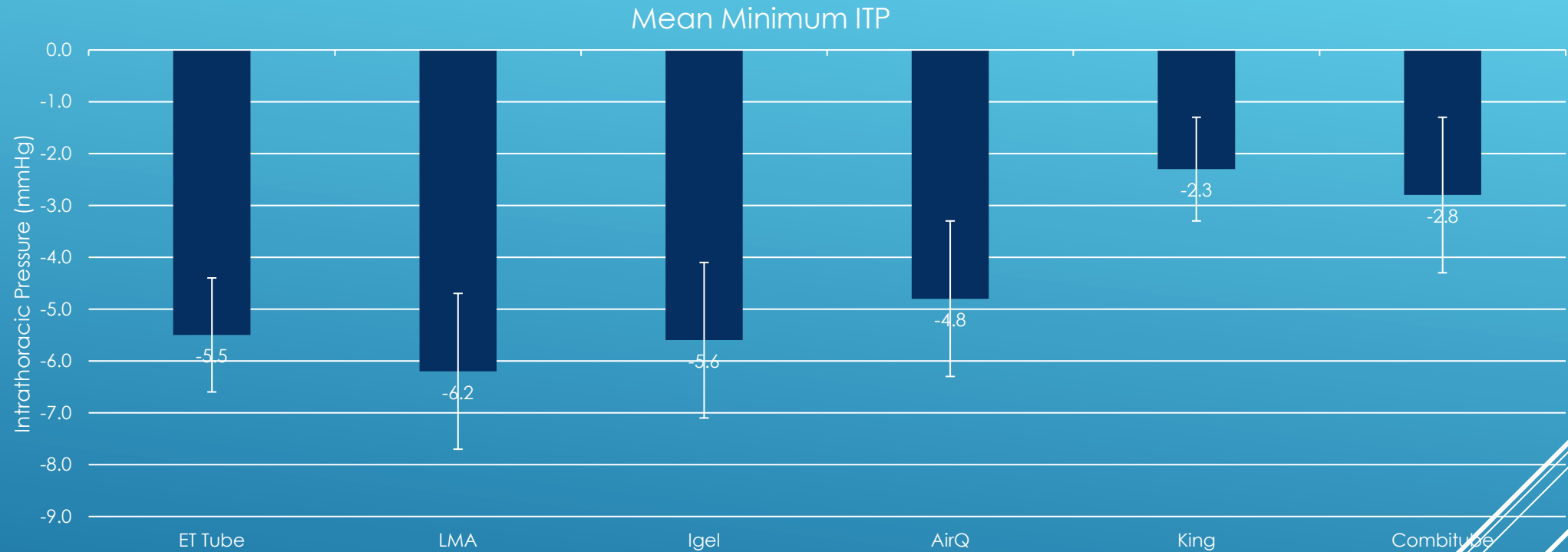
Et Tube



mmHg

HUMAN CADAVER (N=7)

# ACTIVE COMPRESSION-DECOMPRESSION CPR WITH ITD-16 AND HEAD UP



Original Study Data 2018  
[10.1016/j.resuscitation.2019.12.022](https://doi.org/10.1016/j.resuscitation.2019.12.022)

# Study 2 Updated devices

Currently under review JEM

Table 2b Mean Negative Airway Pressures (cmH<sub>2</sub>O).

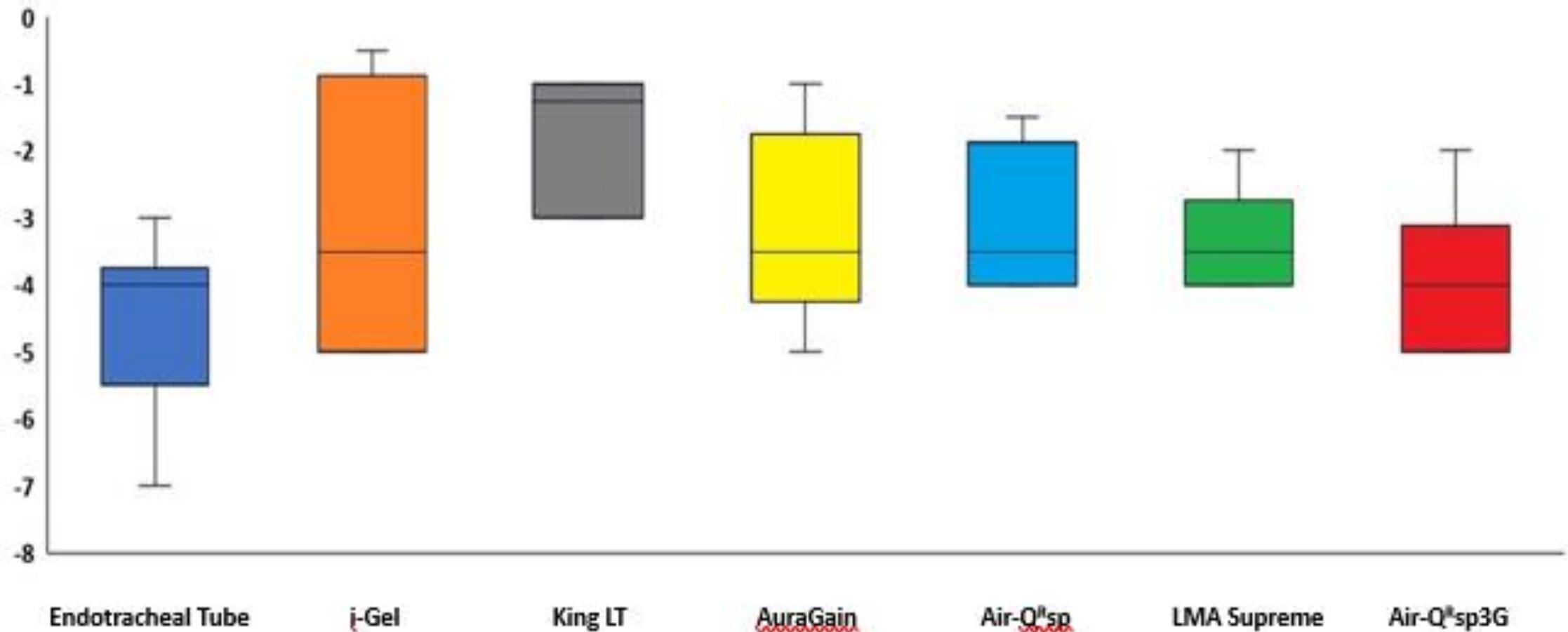
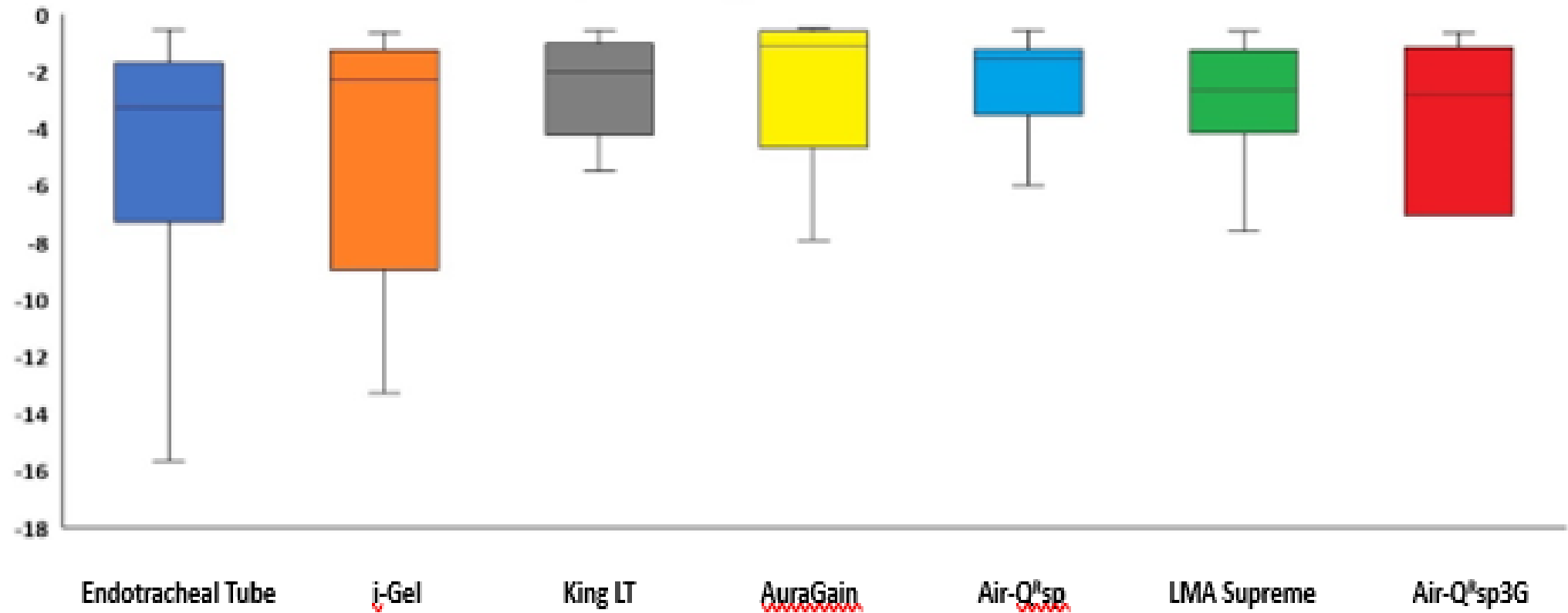


Table 3b-Maximum Negative Intrathoracic Pressure on Chest Recoil (cmH<sub>2</sub>O).



# TAKE-AWAYS.....

SGAs have improved

Prior signals remain in the setting of low flow states

