# Report on the 2024 European Resuscitation Council Congress

#### Athens, Greece | 31st October - 2nd November 2024

The 2024 European Resuscitation Council (ERC) Congress, held from 31st October to 2nd November in Athens, Greece, brought together over 1200 leading experts, practitioners, and stakeholders from around the world to discuss the latest advancements in resuscitation science and practice. The congress provided a mix of scientific presentations, workshops, and debates focused on enhancing patient outcomes of cardiac arrest and other life-threatening emergencies through best practices, research, innovation, collaboration.

The interim executive leadership of the Uganda National Resuscitation Committee (UNRC, see photograph below) attended the congress and met the driving team and various members of ERC. This is to initiate the procedure involved in forming a resuscitation council, which will enable integrating resuscitation standards into the national healthcare policies, emergency services practice as well as training curriculums.



(Photo on the Left) Some of the Interim leaders of the UNRC (Left to right): Joseph Ssenkumba (Coordinator), Laura Beutler (Internation Relations), Duncan Beutler-Muhumira (General Secretary), Dr Andrew Ssekitoleko (Chairperson), and Prisca Kizito (Training and Education Lead)



## Key Highlights and Benefits from the Congress

The ERC Congress is renowned for its robust scientific sessions, workshops, and interactive discussions. Attendees benefitted from a wide range of presentations and sessions focused on cutting-edge research in resuscitation. Key topics included:

1. Cardiac Arrest Management: A major focus was placed on the latest advancements including wearable devices and automated external defibrillators

(AEDs), which are showing promise in improving outcomes. The CPR competition was a great highlight.

- Innovative Resuscitation Techniques: A central theme was the integration of Artificial Intelligence (AI) and how it improves prediction of out of hospital cardiac arrest and utilization of registries to standardize data collection. New techniques in advanced airway management, neuroprotection, and therapeutic hypothermia were showcased.
- 3. **Improved Post-Resuscitation Care**: Several sessions focused on the importance of comprehensive post-cardiac arrest care and neurological recovery. The prestigious Peter Safar lecture focused on extracorporeal CPR (eCPR) and emphasized the need for strong out-of- hospital and in-hospital systems, patient and time factors key to successful eCPR even in resource-rich settings. The concept of survivorship was also reiterated as key to advocacy and improvement of care.
- **4. Training and Education**: Workshops on the latest resuscitation guidelines emphasized the importance of training all cadres and the public in life support (ALS) skills. Simulation-based training methods, different fidelity mannequins, and virtual reality were highlighted as effective tools for enhancing learning outcomes.

#### Focus on Low- and Middle-Income Countries (LMICs)

The congress featured a dedicated session on resuscitation progress, challenges and solutions in low- and middle-income countries (LMICs) such as Uganda, Tunisia, Sri Lanka. Updates included low-cost technologies such as smart-phone applications to guide CPR and the use of community first responders to extend prevention of cardiac arrest and basic life support skills.

On behalf of Uganda, we presented their efforts in improving training in hospitals, public spaces, teaching institutions and rural communities. It was shared that the Association of Ambulance Professionals (AAPU) has been instrumental in training over 150 providers, 25 instructors and 5 course directors in Advanced, Paediatric and Neonatal Life Support (ALS, EPALS, NLS). We emphasized the importance of training local healthcare workers and community members in CPR and basic emergency care.

We shared the strides made in forming resuscitation teams and improving the availability of required equipment with the support of international organizations and non-profits.

Secondly, we expressed the need to officially join the ERC as the Uganda National Resuscitation Committee which will be multidisciplinary/multispecialty in the set-up, with standard-setting, education, innovation, dissemination and collaboration as key pillars.

Our request was supported with a strong recommendation from the DGHS and a No objection from the permanent secretary ministry of Health.



The interim UNRC leadership with ERC Board

## Conclusion

The 2024 ERC Congress in Athens provided valuable insights into the latest developments in resuscitation science, education, and technology. The focus on innovations in life-saving techniques, alongside the sharing of challenges and successes in LMICs, reinforced the global commitment to improving survival rates from cardiac arrest and other life-threatening emergencies. The take-aways were a holistic approach to **survival-** long-term recovery and quality of life, establishing robust **resuscitation councils-** an essential step to improve care standards globally, use of **artificial intelligence** in clinical decision- making and resuscitation training offers potential to enhance outcomes, while **eCPR** is a breakthrough for refractory cardiac arrest. Collaboration, education, and innovation remain integral to advancing the field of resuscitation and improving survival rates across diverse populations.

We would like to thank the Ministry of Health, the department of EMS, the interim leadership of the UNRC and all stakeholder in resuscitation for the continuous support you give to the establishment. Thank you all.

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