

Differences between a heart attack and a sudden cardiac arrest

	Heart attack	Sudden cardiac arrest
Cause	The blood supply to the heart muscle is suddenly blocked, resulting in the death of the heart muscle.	Abnormal heart rhythm (called ventricular fibrillation) which is often fatal.
Warning signs	Often preceded by pain in chest, arm, upper abdomen or jaw; nausea and sweating are common.	Rarely a warning.
Victim's response	Usually remains awake and able to talk; may appear to be in extreme pain.	Loses consciousness or is found unconscious. Is not breathing or is not breathing normally (i.e., gasping).
Risk of death	With early and appropriate treatment, many people survive.	90-95% of victims in ventricular fibrillation will die unless a shock from a defibrillator is delivered within 10 minutes of collapse.*
Treatment	Best treated by emergency responders. Lay responders can assist until the emergency responders arrive by having victim chew an aspirin tablet and drink a whole glass of water if they are conscious. If the victim is unconscious, but is breathing, lay the victim on his or her side to make sure nothing obstructs his or her airway.	The only effective treatment for SCA due to ventricular fibrillation is an electrical shock called defibrillation. Defibrillation is an electrical current applied to the chest via an automated external defibrillator (AED), or via a non-automated defibrillator operated by a medical professional trained in ECG rhythms and defibrillation. The electrical current passes through the heart with the goal of stopping the ventricular fibrillation and providing an opportunity for the heart's normal electrical system to take control. Defibrillation helps the heart reorganize its own electrical activity so it can pump blood again.

*The American Heart Association recommends that defibrillation occur within three minutes or less. Early defibrillation has been shown to significantly increase the rate of survival for SCA victims. (From Physio-Control website "About SCA" page.)

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