EPIDEMIOLOGY OF RESUSCITATION
KEY MESSAGES

GUIDELINES 2025
EUROPEAN RESUSCITATION COUNCIL©

Establish National Registries

All European countries should have comprehensive national registries for Out-of-Hospital Cardiac Arrest (OHCA) and In-Hospital Cardiac Arrest (IHCA) according to the Utstein template.

Use Multidisciplinary Teams for counselling

Autopsy and genetic results should be managed by multidisciplinary teams in specialized clinics to provide family counselling and eventual screening.

Conduct Comprehensive Autopsies

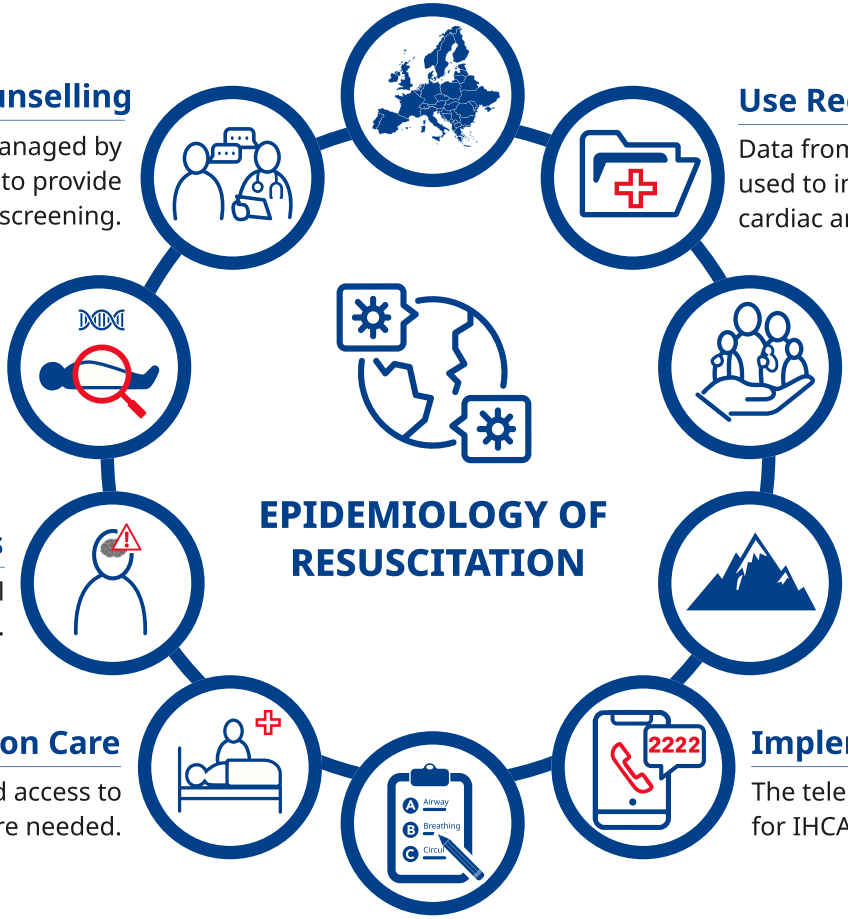
All victims of unexpected sudden death under age 50 should receive a full autopsy, including genetic analysis using 5-10 ml of blood in EDTA.

Measure Long-term Patient Outcomes

Routine measurement of physical and non-physical outcomes for all cardiac arrest survivors is essential.

Enhance Post-resuscitation Care

More research and expanded access to post-resuscitation rehabilitation services are needed.



Use Registry Data for System Planning

Data from OHCA and IHCA registries should be used to inform healthcare system planning and cardiac arrest responses.

Support Low-resource settings

Epidemiological registries must be developed in low-resource settings to allow improvement of treatment and outcomes.

Improve response systems in remote areas

Improved emergency response systems must be developed in remote areas to improve outcomes.

Implement 2222 for IHCA

The telephone number 2222 should be standardized for IHCA response across Europe.

Expand IHCA Research

There is a need for increased research efforts focused on in-hospital cardiac arrest in Europe.