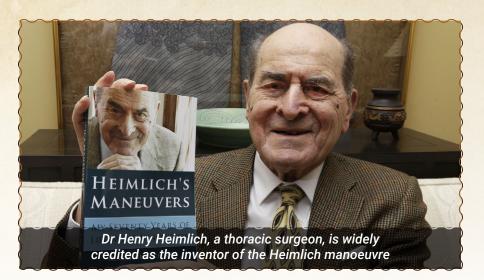


History of the Heimlich manoeuvre



he Heimlich manoeuvre was conceived of by Dr Henry Heimlich, a thoracic surgeon, who noted that many people were dying each year from choking. He conceptualised using air that was compressed in the lungs to help expel whatever was blocking the windpipe. Dr Heimlich first worked on anesthetised dogs in a laboratory in order to perfect his technique. He found that by compressing the abdomen with an upward thrust, he could successfully clear a blockage in the windpipe. Since the invention of this

technique, the Heimlich manoeuvre has saved several million lives.

Henry Judah Heimlich (3 February 1920 – 17 December 2016) was an American thoracic surgeon and medical researcher. He is widely credited as the inventor of the Heimlich manoeuvre, a technique of abdominal thrusts for stopping choking. He also invented the Micro Trach portable oxygen system for ambulatory patients and the Heimlich Chest Drain Valve or "flutter valve", which drains blood and air out of the chest cavity.

Heimlich first published his views about the manoeuvre in an informal article in the magazine Emergency Medicine on 1 June 1974, entitled, "Pop Goes the Cafe Coronary". On 19 June 1974, the Seattle Post-Intelligencer reported that retired restaurant-owner Isaac Piha used the procedure to rescue a choking victim, Irene Bogachus, in Bellevue, Washington. Heimlich formally described the technique in a pair of 1975 medical journal papers, published in the Journal of the American Medical Association and the Annals of Thoracic Surgery.

From 1976 to 1985, the chokingrescue guidelines of the American Heart Association and of the American Red Cross taught rescuers to first perform a series of backblows to remove the foreign body airway obstruction (FBAO); if backblows failed, then rescuers learned to proceed with the Heimlich manoeuvre (aka 'abdominal thrusts'). After a July 1985 American Heart Association conference, backblows were removed from choking-rescue guidelines. From 1986 to 2005, the published guidelines of the American Heart Association and the American



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and rescue emergency industry by focusing on the correct way of doing thing. There are no shortcuts, only hard work and dedication to achieve this.

Institutes must focus on the minimum requirements for South Africa as K9 handlers. Therefore, implementing and enforcing the PAPA Act requirements and safeguarding all working dogs as recommended by the Act, irrelevant of the industry.

There is a vast difference between 'man trailing/tracking' dogs

vs search and rescue certified dogs. Man trailing/tracking is searching for a missing person/ item with the use of a dog and NOT 'search and rescue'. Search and rescue by law is a municipal function under the appointed fire chief having jurisdiction and not a voluntary service or any other services responsibility. Without disrespecting any institutes or individuals based on the above statement, the recommendation will be to read the Fire Brigade Services' Act, The White Paper for Fire Services and the relevant Governing Municipal Systems Act's.

HERITAGE



1. Lean the person forward slightly and stand behind him or her.



Put your arms arund the person and grasp your fist with your other hand near the top of the stomach, just below the center of the rib cage.



2. Make a fist with one hand.



4. Make a quick, hard movement, inward and upward.

Place the infant stomach-down across your forearm and give five thumps on the infant's back with heel of your hand





Place fist above navel while grasping fist with other hand. Leaning over a chair or countertop, drive your fist towards yourself with an upward thrust

Red Cross recommended only the Heimlich manoeuvre as the treatment for choking; the National Institutes of Health still does apply it for conscious persons over one year of age, as does the National Safety Council.

The 2005 choking-rescue guidelines published by the American Heart Association called the procedure 'abdominal thrusts'. The new guidelines stated that chest thrusts and back blows may also deal with choking effectively.

In 2005, the American Red Cross "downgraded" the use of the Heimlich manoeuvre, essentially returning to the pre-1986 guidelines. For conscious victims, the new guidelines nicknamed 'the five and five', recommend first applying five backblows; if this method fails to remove the airway obstruction, rescuers will then apply five abdominal thrusts. For unconscious victims, the new guidelines recommend chest thrusts, a method first recommended in a 1976 study by Charles Guildner, with results duplicated in a study by Audun Langhelle in 2000. The 2006 guidelines also eliminated the phrase 'Heimlich manoeuvre' and replaced it with 'abdominal thrust'.

Allegations of case fraud have dogged Heimlich's promotion of abdominal thrusts as a treatment for drowning. The 2005 drowning rescue guidelines of the American Heart Association did not include citations of Heimlich's work and warn against the use of the Heimlich manoeuvre for drowning rescue as unproven and dangerous, due to its risk of vomiting leading to aspiration.

In 2003, Heimlich's colleague Edward Patrick issued a press release portraying himself as the uncredited co-developer of the

manoeuvre. "I would like to get proper credit for what I've done...but I'm not hyper about it."

Heimlich claimed to have used his namesake manoeuvre to rescue a choking victim for the first time on 23 May 2016, when he was aged 96, reportedly saving the life of a fellow resident of his senior living community, Patty Ris. However, in 2003, he told the BBC that he had used it for the first time on a man choking in a restaurant. According to his son, Peter M Heimlich, "Both 'rescues' were bogus."

Heimlich claimed his namesake treatment may have saved the lives of more than 50 000 people. However, according to Sayre in 2005, "Despite widespread education on the use of the Heimlich manoeuvre and other techniques for treatment of acute airway obstruction, the death rate remains stable." A