FROM THE INSIDE

Would my “Eriksen” wake up again?

Gentle Sunder Shrestha^{1,2*}

© 2021 Springer-Verlag GmbH Germany, part of Springer Nature

Close to the end of the first half of the Euro 2020 match between Denmark and Finland, the famous Denmark midfielder collapsed in the field. The thousands of spectators in the stadium and the millions watching the match live on television were initially uncertain as to what was going on. Soon those millions realized that the Danish hero had sustained a sudden cardiac arrest. Cardiopulmonary resuscitation (CPR) was initiated in the field and with that the millions of other hearts trembled and quivered. Prayers were being uttered spontaneously, crossing all the barriers of language, race, ethnicity and nationality.

The eyes of the spectators started to tear, expressing the fear of losing him forever. A big silence prevailed, made heavy with hope. After one shock with an automated external defibrillator (AED), the hero's heart started to effectively pump again. Eriksen left the field on a stretcher, awake. Thanks were felt by the millions of hearts that had hoped and prayed. The hands of God which delivered timely CPR, and the much needed shock to restart the heart did the wonders.

The event made me recall an unforgettable event of my life, 3 years ago. I was an intensivist in the capital of Nepal. Resuscitation and CPR were routine for me. One Saturday morning while I was relaxing at home, my mother sustained a sudden cardiac arrest. I noticed it within minutes, and my reflex act of resuscitation with brief CPR and one mouth to mouth breath revived her rapidly. I rushed her to the nearby hospital, conscious. I felt myself to be one of the luckiest sons who could save the hero of his life, by doing simple chest compressions and blowing one breath into her lungs. I silently thanked the hundreds of patients who had received CPR from my hands, that made this moment possible.

Both of the above stories are mere exceptions. I could figure out some similarities though. Eriksen and my mom, both were heroes for someone. Moreover, for both, timely chest compressions enabled them to wake up again. Basic life support (BLS) is established as a standard of care for any collapsed victims both outside and inside the hospital. Multiple evidence-based guidelines support it and the world clearly saw that it works. When performed on time, and by a trained person, lives can be salvaged. The heroes can sometime return from the jaws of death. In the developed world, by-stander CPR and calling emergency services are standard practices. However, proper BLS is extremely rare in the underdeveloped world, not only outside the hospital, but also in hospital wards. Despite this big difference and a wide evidence-practice gap in the underdeveloped world, human physiology remains the same universally. Lives are precious, and everyone can be that hero that has defined another's life.

In the underdeveloped world, prehospital care, the system of calling emergency services and knowledge of CPR among public is almost non-existent. We often see the lives lost at home or someone rushing their hero unsalvageable to the hospital, helpless and asking—“would my Eriksen wake up again”?

Author details

¹ Department of Anaesthesiology, Tribhuvan University Teaching Hospital, Maharajgunj, Kathmandu, Nepal. ² Maharajgunj, 1524, Kathmandu, Nepal.

Acknowledgements

I declare no conflicts of interest.

Declarations

Conflicts of interest

The authors declare that they have no conflicts of interest.

Publisher's Note

Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Received: 15 June 2021 Accepted: 20 July 2021
Published online: 4 August 2021

*Correspondence: gentlesunder@hotmail.com

¹ Department of Anaesthesiology, Tribhuvan University Teaching Hospital, Maharajgunj, Kathmandu, Nepal

Full author information is available at the end of the article