

# Minimal training saves lives with airway mask

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Virtually anyone has the skills to safely insert a laryngeal mask airway (LMA) to keep a patient's airway open during resuscitation, and medical expertise isn't required - perhaps just a familiarity with ER, House or Grey's Anatomy. A study, published in the open access journal *BMC Emergency Medicine*, also found that just two hours of training was enough to make first-responders faster and more efficient during these highly critical situations.

Whether it's a sudden [heart attack](#) or roadside accident, even minimal [training](#) can make a big difference when a rescuer tries to insert a breathing tube into someone needing cardiopulmonary resuscitation (CPR). LMAs are used to keep a patient's windpipe open and secure during life-saving CPR or mouth-to-mouth, and are far easier to insert than the intubation performed in hospitals by [medical professionals](#). This finding could greatly improve the level of [emergency care](#) in factories and public facilities where physicians or nurses are rarely the first-responders.

Johannes Bickenbach and Gereon Schälte from University Hospital Aachen, Germany conducted the study by testing 139 first-year medical students at the very beginning of their studies. They measured their speed and effectiveness with two different kinds of LMA before and after a two-hour training program. With both devices, the insertion time was cut nearly in half after the training. With the LMA-Classic, the insertion time fell from an average of 55.5 seconds to 22.9 seconds, whereas with the LMA-Fastrach device the time fell from 38.1 seconds to 22.9 seconds.

The researchers recommend regular refresher courses to keep people familiar with the device. They found that after six months of non-use, the medical students became less skilled at inserting the devices, and their insertion times returned to untrained levels.

More information: The intuitive use of laryngeal airway tools by first year medical students; Johannes Bickenbach, Gereon Schälte, Stefan Beckers, Michael Fries, Matthias Derwall and Rolf Rossaint; *BMC Emergency Medicine* (in press); [www.biomedcentral.com/bmcemergmed/](http://www.biomedcentral.com/bmcemergmed/)

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