More on the Choking Controversy

I have been interested in the treatment of the choking victim and have followed the interesting dialogues and discussions involving the Heimlich Maneuver. I now wish to address my comments to the subject of the Heimlich Maneuver, long controversial and now officially accepted for treatment of choking victims by the American Red Cross and the American Heart Association.

Dr. C. Everett Koop, Surgeon General of the U.S. Public Health Service, has forcefully intervened to end the ambiguous and often acrimonious state of affairs. He is to be congratulated for his firm support of the Heimlich Maneuver as the sole treatment for choking victims and condemning back slaps and chest thrusts as dangerous. His actions are indeed supported by the wealth of accumulated successful Heimlich Maneuver results worldwide. It is hoped that the American Red Cross and the American Heart Association will warn the millions of persons they taught to use backslaps for choking that the procedure is dangerous.

Doctors Greensher and Montgomery still support chest thrusts for the child under 1 year of age. They ignore the huge numbers of CPR chest thrusts injuries as reported in *Pediatrics* 1982: 70: 120 and the fact that there are no reports or anecdotes of a chest thrust being used on an infant.

There appears to be confusion over what transpired at the national conference on choking that was held July 13, 1985, in Dallas. Montgomery and Greensher stated incorrectly that the 1985 National Conference recommended back blows and chest thrusts for choking infants under 1 year of age. According to the transcript of the official American Heart Association tape of the conference, Dr. Roger White of the Mayo Clinic and Chairman of the Panel on Management of Foreign Body Airway Obstruction reported, "We concluded that the American Heart Association should adopt abdominal thrusts (Heimlich Maneuver) as the exclusive maneuver for the treatment of foreign body airway obstruction. The majority of the panel recommended adoption of the abdominal thrust exclusively for adults, for infants, and for children. One member of the panel (Dr. Greensher) concurred with these recommendations, except that he recommended retention of our present procedures for children under 1 year of age until further data become available for this age and size group of patients."

Montgomery and Greensher discarded the recommendations of the other five panel members in the months after the conference adjourned. The recommendations made at the 1985 National Conference on using the Heimlich Maneuver to treat choking infants under 1 year were accepted by all participants except one, so it is most surprising that there should be any discussion about the recommended procedure.

The Montgomery-Greensher letter reports that Dr. Heimlich's two references from *Pediatrics* (1982: 70: 120 and 1983: 71: 982) "are a letter to the editor and a commentary article—both by Dr. Heimlich." The reader should look up these articles. The first paper is by Dr. Heimlich and lists 55 references, many of which refer to chest thrust injuries including damaged liver, heart, spleen, lungs, and chest wall. The second reference is a letter to the editor from Dr. William H. Montgomery and Dr. Heimlich's rebuttal that proves Dr. Montgomery's statements to be invalid by citing the Standards and Guidelines of the American Heart Association. The Surgeon General's statement that chest thrusts are "hazardous, even lethal," is confirmed in these publications.

Doctors Greensher and Montgomery list four references supposedly supporting their position to use chest thrusts in choking infants. Not one of those references contains a report or anecdote indicating that a chest thrust has saved a choking victim under 1 year of age. The Heimlich Maneuver, on the other hand, has been reported in documented cases as well as in scientific studies to have saved the lives of many infants. To experiment on children, as suggested by Greensher and Montgomery, by educating people to use chest thrusts, which have been proven to cause so many injuries and deaths, raises serious ethical questions.

I'm sure Doctors Greensher and Montgomery, after careful review of all the facts, will readily confirm the reliability of the Heimlich Maneuver for children under 1 year of age.

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Doctors Montgomery and Greensher Reply

Dr. Schwartz is misinformed about several issues and we welcome the opportunity to respond. While we have the utmost respect for Dr. C. Everett Koop, it should be understood that his public statement on first aid for treatment of choking and editorial on the Heimlich Maneuver (1) in no way influenced the final recommendations of the 1985 National Conference as published in the June 6, 1986, issue of the Journal of the American Medical Association (JAMA) (2). Dr. Koop should not be portrayed as the final arbitrator in this controversy for that he was not.

The American Heart Association and the American Red Cross have begun an orderly process to promulgate changes in the Standards and Guidelines and amongst the changes are those related to the management of