

Is There an Association Between Targeted Temperature Management (TTM) of 32 °C to 36 °C and Neurological Outcomes?

STUDY DESIGN

Registry and trial data of **patients who are comatose after resuscitation from out-of-hospital cardiac arrest** (OHCA) were obtained from the Sudden Death Expertise Center (SDEC) registry (France) and the Resuscitation Outcomes Consortium Continuous Chest Compressions (ROC-CCC) trial (USA and Canada)

Severity at ICU admission assessed through modified Cardiac Arrest Hospital Prognosis (mCAHP) score and categorized into mild, moderate, and severe tertiles

RESULTS



Registry/Trial	SDEC	ROC-CCC
n	2,723	4,202
TTM 32 °C-36 °C	60%	55%
ICU survival	30%	37%
Favorable neuro outcome	27%	29%
Odds (adjOR CI) of favorable neuro outcome with		
Low mCAHP	1.63 [1.15 – 2.30]	1.36 [1.05 – 1.75]
Mod mCAHP	1.29 [0.85 – 1.93]	1.26 [0.98 – 1.62]
High mCAHP	1.94 [1.06 – 3.54]	2.24 [1.38 – 4.24]

In patients with OHCA, TTM of 32 °C to 36 °C was associated with a better outcome in patients with low and high severity of illness at ICU admission.