

论 著

· 军事医学 ·

“急救白金十分钟-全国自救互救日”部分地区大众急救现状横断面调查

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[摘要] **目的** 探讨我国不同地区群众急救水平和急救意识的差异。**方法** 2014年10月10日中国急救日“白金十分钟”活动, 自主填写调查问卷进行调查, 并采用SPSS 13.0软件进行统计学分析。**结果** 共回收全国16个城市的问卷1580份, 其中有效问卷1422份。参与调查者年龄14~83(40.2±19.4)岁; 男483人, 女703人, 其中64.7%(767人)听说过急救“白金十分钟”。有57.8%的群众认为“白金十分钟”应由大众自己进行现场急救。52.0%的大众遇到紧急情况会呼叫急救系统; 83.8%的群众没有处置过家人意外伤病的救治过程; 仅有53.2%的群众主动学习过互救知识; 接受知识的方法有电视学习、学校培训、报纸学习、课外培训和其他方法等; 家人遇到紧急意外的伤病, 27.2%的群众认为自己能力有限; 现场意外伤病, 30.4%的群众选择在有人呼叫时参与。中部、东北、沿海、西北地区得分分别为80、70、60、50分($P<0.05$)。男性、女性得分分别为70、80分($P<0.05$)。21~40岁、<20岁、41~60岁、>60岁得分分别为90、80、70、50分($P<0.05$)。进行过自救互救学习或培训的得分(90分)高于未培训者(70分, $P<0.05$)。听说过“白金十分钟”者得分(71分)高于没听说过者(63分, $P<0.05$)。自救和“白金十分钟”培训都学过的得分(77分)最高, 没学过自救, 学过“白金十分钟”者得分(69分)次之, 学过自救, 没学过“白金十分钟”者得分(67分)较低; 两者均未学过者得分(64分)最低($P<0.01$)。88.2%的人觉得此项培训很实用, 20.2%的人认为能独立教会别人急救, 5.0%的人认为只能教心肺复苏, 83.2%的人认为这种科普培训非常必要。**结论** 普及大众急救知识和意识, 提高大众自救和互救的能力对构建自救互救体系、战场救护体系、平战结合的战创伤救治体系具有重要意义。

[关键词] 急救; 白金十分钟; 问卷调查

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Cross section survey of public emergency response on the "National Day of Emergency Platinum Ten Minute- Self and Mutual Rescue" in some areas

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[Abstract] Objective To explore the difference in level of first-aid capability and consciousness of the masses in different regions of China. **Methods** The survey was performed by filling the questionnaire on the "National Day of Emergency Platinum Ten Minutes" over the country China on October 10, 2014. The data were analyzed by SPSS 13.0 software. **Results** A total of 1580 questionnaires were returned from 16 cities, and among them 1422 were valid. The highest age of the subjects involved in the investigation was 83 years, the youngest 14 years, with the mean age 40.2 years. There were 483 men and 703 women, of whom 767(64.7%) had heard of the "platinum ten minutes" project. 57.8% people believed that the "platinum ten minutes" was their own affair. 52.0% of them offered that they would call the emergency system when met an emergency; 83.8% did not have the experience of dealing with an accident; only 53.2% of them had actively learned first aid knowledge from TV, training schools, newspapers, extracurricular training etc. 27.2% of the people thought that they were not able to deal with accident or emergency of their families. On the scene of an injury, only 30.4% of the people would be willing to deal with the accident only when they were asked to. The scores of the middle, northeast, coastal and northwest regions were 80, 70, 60 and 50 ($P<0.05$) respectively. The scores for male and female were 70 and 80 ($P<0.05$) respectively. The scores of the people 21-40 years old, <20 years, 41-60 years, and >60 year were 90, 80, 70 and 50 ($P<0.05$). The scores of the people who had received education of first aid and mutual aid (90 points) were higher than those without training (70, $P<0.05$). The scores (71 points) of the people who had heard "platinum ten minutes" were higher than those of ignorant of it (63 points, $P<0.05$). The people who received the training of both "first aid" and "platinum ten minutes" won the highest score (77 points). The people who have not learned "first aid" but only learned the "platinum ten minutes" got 69 points, those had learned first aid, but did not learn "platinum ten minutes" (67) had lower scores, who had not learned both of them got the lowest score (64 points; $P<0.01$). 88.2% of the people felt that this training was very practical, 20.2% of them thought that they were able to independently teach the first aid, 5.0% of them believed that they could teach only the technic of cardiopulmonary resuscitation, and 83.2% of them believed that this scientific training was very necessary. **Conclusion** The popularization of first aid knowledge and awareness and improvement in the ability to practice first aid and mutual aid are of great significance for the construction of "self aid and mutual rescue" system, battlefield rescue system, and trauma treatment system, which are of importance both in peacetime and wartime.

[Key words] first aid; platinum ten minutes; questionnaires

“急救白金十分钟-全国自救互救日”活动由全国志愿者于2010年10月10日10点10分创立，到目前为止已经举办了5届，其目的是提高群众的自救和互救意识，提高全民急救共识。这是急危重症专业领域成果的一次成功转化，也把专业的声音向专业以外进行了传递，形成了专业的社会声音、正能量和正形象，取得了很好的社会反响。在这个活动中，还形成了大范围调查大众自救互救的研究平台。“急救白金十分钟-全国自救互救日”活动于

每年10月10日上午开展^[1-3]，由急危重症专业医师与大众进行直接接触教学，在街头、街道、教室、公园等地点，采用讲解、示范、操作等形式进行急救技术的科学普及。本研究对2014年的活动进行调查，现报告如下。

1 资料与方法

1.1 研究对象 2014年10月10日上午10:00-12:00，“急救白金十分钟-全国自救互救日”在全国范围

内发放问卷进行问卷调查。共回收16个城市的问卷调查,分别是:(1)浙江省温州市;(2)宁夏银川市;(3)江苏省南京市;(4)江苏省盛泽市;(5)辽宁省大连市;(6)江西省新余市;(7)四川省泸州市;(8)河北省邯郸市;(9)湖南省邵阳市;(10)内蒙古乌兰浩特市;(11)四川省德阳市;(12)山东省威海

市;(13)湖北省宜昌市;(14)湖南省湘潭市;(15)北京市;(16)广东省中山市。其中1、3、4、12、16位于沿海地区;2、9位于西北地区;5、8、15位于东北地区;6、7、10、11、13、14位于中部地区。16个共收回问卷1580份,其中有效问卷1422份,具体问卷情况如表1。

表1 各城市参与活动的基本情况

Tab. 1 Regions and units participated in the investigation

No.	Region and unit	Case	Percentage(%)
1	Second Affiliated Hospital of Wenzhou Medical College, Zhejiang	59	4.1
2	The Fifth Hospital of CPLA, Yinchuan, Ningxia	93	6.5
3	People's Hospital of Jiangsu Province	182	12.8
4	Shengze Hospital of Jiangsu Province	160	11.2
5	Affiliated Zhongshan Hospital of Dalian University, Liaoning	140	9.8
6	Emergency Rescue Center of Xinyu, Jiangxi	62	4.3
7	People's Hospital of Luzhou, Sichuan	101	7.1
8	Chinese Traditional Medicine Hospital of Handan, Hebei	17	1.2
9	People's Hospital of Ulanhot Hinggan League, Inner Mongolia	57	4.0
10	Shaoyang Hospital of Traditional Chinese Medicine, Hunan	77	5.4
11	People's Hospital of Deyang City, Sichuan	35	2.5
12	Weihai City Hospital, Shandong	79	5.5
13	Renhe Hospital Affiliated to China Three Gorges University, Hubei	85	6.0
14	First People's Hospital of Xiangtan City, Hunan	83	5.8
15	Beijing area	138	9.7
16	Affiliated Zhongshan Hospital of Zhongshan University, Guangzhou	54	3.8
Total		1422	100

1.2 方法 2014年10月10日上午10:00-12:00,在全国急救日地区全面投放问卷,采取群众自主填写问卷的方法,对其中回收的16个城市的调查问卷进行分析。该问卷由4部分内容组成,分别是:(1)基本信息;(2)自救互救理论与意识;(3)急救知识考题(以100分作为总分);(4)培训效果。

1.3 统计学处理 采用SPSS 13.0软件进行统计分析,采用两样本或多个样本独立非参数检验。 $P < 0.05$ 为差异有统计学意义。

2 结 果

2.1 基本信息 剔除项目填写不全的问卷,最终纳入总人数1186人,其中男483人,女703人,年龄14~83(40.2 ± 19.4)岁,64.7%(767人)的人听说过急救“白金十分钟”。具体情况见表2。

2.2 自救互救理论与意识 57.8%(816人)的群众认为“白金十分钟”应由大众进行现场急救,28.6%(404人)的群众认为“白金十分钟”应留给120系统,15.7%(222人)的群众认为“白金十分钟”应留给专业医师,3.9%(55人)的群众认为“白金十分钟”应留给卫生主管部门。52.0%的群众认为遇到紧急情况应呼叫急救系统,93.8%的群众遇

到伤病会选择120,83.8%的群众没有处置过家人意外伤病的救护过程。53.2%(748人)的群众主动学习互救知识,51.4%(725人)通过电视学习急救知识,25.7%通过学校培训学习急救知识,19.6%通过报纸学习急救知识,12.6%通过课外培训学习急救知识,19.7%通过其他培训学习急救知识。如果家人遇到紧急意外的伤病,27.2%(384人)的群众认为自己能力有限,30.4%(434人)的群众选择在有人呼叫时参与,具体情况如表2所示。

2.3 急救知识问卷结果比较 地区比较:中部得分(80分)最高,东北地区得分(70分)次之,沿海地区得分(60分)较低,西北地区得分(50分)最低,各组之间差异有统计学意义($P < 0.05$)。性别、年龄比较:男性得分(70分)低于女性(80分),差异有统计学意义($P < 0.05$);21~40岁得分(90分)最高,<20岁得分(80分)次之,41~60岁得分(70分)较低,>60岁得分(50分)最低,各组之间差异有统计学意义($P < 0.05$)。“白金十分钟”科普模式与其他模式比较:进行过自救互救学习或培训的得分(90分)高于没有进行过自救互救学习或培训的得分(70分),差异有统计学意义($P < 0.05$);听说过“白金十分钟”的得分(71分)高于没有听过“白金十分钟”的得

表2 白金十分钟自救互救理论与意识

Tab. 2 Communal awareness of "platinum in 10 minutes" self-and-mutual rescue theory

Item	Case	Percentage (%)
Usually actively learning the mutual aid knowledge	1405	
Active	748	53.2
Passiveness	657	46.8
Ways to improve knowledge of first aid	1411	
School Training	363	25.7
Extracurricular Training	178	12.6
TV Learning	725	51.4
Newspapers Learning	276	19.6
Other Training	278	19.7
Best disposal personnel for "platinum ten minutes"	1412	
Health authorities	55	3.9
120 system	404	28.6
Physician	222	15.7
Ordinary people	816	57.8
Number of calls in an accident	1421	
110	151	10.6
120	1338	93.8
119	58	4.1
999	43	3.0
122	22	1.5
Experience to deal with the accidental injuries	1410	
No	1182	83.8
Yes	228	16.2
Whether having the ability to rescue the family when they fell in injury or illness	1401	
Never thought	467	33.3
No such ability	380	27.1
I will in future	583	41.6
How will you do when occasionally encounter a fainting people in street	1411	
I have no ability	384	27.2
Go follow others	434	30.4
Other options	625	44.3
How to treat the accidental injuries happened during work	1409	
Report to the leadership	688	48.2
Seek for colleagues help	148	10.5
Call emergency system	733	52.0
Self-rescue	123	8.7

分(63分), 差异有统计学意义($P<0.05$)。两者都学过的得分(77分)最高, 没学过自救但学过“白金十分钟”的得分(69分)次之, 学过自救但没学过“白金十分钟”的得分(67分)较低, 两者都没有学过的得分(64分)最低, 各组之间差异有统计学意义($P<0.05$, 表3)。

2.4 举办全国急救、互救的培训效果 关于急救知识和技能的有用程度, 88.2%(1040/1179)觉得很实用, 9.6%(113/1179)觉得一般, 0.8%(10/1179)认为不太好, 1.4%(16/1179)认为不好说。关于

表3 急救知识问卷结果比较

Tab. 3 Questionnaire results of first aid knowledge

Item	Case	Score
Region	1422	
Coastal region	534	60
Northwest region	150	50
Northeast region	295	70
Central region	443	80
Sex	1186	
Male	483	70
Female	703	80
Ever study or training in first aid	934	
Yes	325	90
No	609	70
Awareness of "platinum ten minutes"	1408	
Yes	767	71
No	641	63
Age (year)	1425	
<20	225	80
21-40	365	90
41-60	267	70
>60	217	50
Whether learned self-help or "platinum ten minutes" knowledge	930	
Just learned help themselves	77	67
Just learned "Platinum ten minutes"	251	69
Learned them both	245	77
Never learned neither of them	357	64

能否教会其他人急救知识, 20.2%(236/1166)认为能独立教会, 5.0%(58/1166)认为只能教心肺复苏(CPR), 65.2%(760/1166)认为能教一些常识, 9.6%(112/1166)认为不敢教别人。对于急救科普培训的必要性, 83.2%(968/1164)认为非常需要, 11.8%(137/1164)认为可以安排, 3.9%(45/1164)认为一般讲讲就可以, 1.2%(14/1164)认为不需要。

3 讨论

既往有大量有关急救培训的科普研究, 体现了前人把急救放到大众层面进行探索的成果^[4]。研究显示, 90.4%的学习者认为有必要在高校内继续进行急救培训, 5.0%的学习者要求急救培训成为高校必修课, 97.6%的学习者认为操作训练很有必要, 操作要占急救培训教学的50.0%左右^[5]。急救培训应突出急救技能的简单性和可操作性, 培训6个月后才剩少数受训者尚能保持原来水平, 每隔1~2年应复训一次^[6]。

近年来随着全民重视, 急救科普得到了发展, 我们采纳了上述经验, 使得“白金十分钟”的急救理念得到不断丰富和完善, 并逐渐被大家接受和运用^[7]。在2014军事演习中, “白金十分钟”急救理念被我军指挥员采用^[8]。本文从以下4个方面进行

了横断面研究。

3.1 大众对意外伤害病的认知和态度 本调查结果显示, 如果遇到意外伤害, 93.8%的群众选择急救首选120, 83.8%没有处置过家人意外伤害病的救护过程, 说明急救并未落实在行动上, 急救的技能还未能掌握。如遇到紧急情况, 52.0%的群众呼叫急救系统, 30.4%的群众选择在有人呼叫的情况下前往, 27.2%的群众认为自己能力有限。由此可见, 真正掌握急救技能的人数太少, 需要更进一步的深入培训。41.6%的群众认为以后可以, 27.1%的群众认为能力不行, 均说明现在亟需学习和普及急救知识。学习救护知识的方法, 53.2%是主动学习, 其中51.4%通过电视学习。对时效性的认识, 只有57.8%能认识到“白金十分钟”是留给大众自己努力的, 而不是依靠其他机构的人。

3.2 差异性比较 不同地区发展的不平衡反映在调整得分中, 中部和沿海地区的得分较高, 而西北部和东北地区得分较低, 因此应加大西北、东北部地区的急救知识培训, 使更多的人掌握急救技能, 促进中国急救水平的提高。从性别年龄差异来看, 男性得分低于女性得分; 年龄在21~40岁得分最高, <20岁得分次之, 41~60岁得分较低, >60岁得分最低。由此可以看出, 21~40岁是社会的主要生产力资源, 在日常生产中, 急救培训机会比较多, 因而得分较高。<20岁是学生或者青年人, 青年人接受知识的能力较快, 易受到社会急救知识的熏陶, 因此应该在学校得到急救知识的培训。41~60岁得分较低, 因为这个年龄层次的人接受新知识的能力下降, 不像上述两组有众多的培训机会。>60岁得分最低, 因为在日常的生活, 他们接受急救培训的机会较少, 接触最多的是养生、保健类电视节目, 因此应该多向老年人传授急救知识。

3.3 对活动的效果评价 此次活动88.2%的群众觉得很实用, 83.2%的群众认为这种科普培训非常需要, 65.2%的群众觉得能教会别人一些常识。关于对“白金十分钟”和其他急救培训知识的学习, 两者都学过的得分最高, 学过“白金十分钟”、没学过其他自救知识的得分次之; 没学过“白金十分钟”但经受过其他急救培训的排名第三; 两者都没有学过的得分最低。表明不同形式的急救培训是相辅相成的, 结合起来能够更加巩固急救知识。

3.4 “白金十分钟”科普模式 此种培训模式以“白金十分钟”急救理论、识别生命体征、心肺复苏操作、气道异物梗阻解除、徒手止血、体外除颤(AED)操作等为核心, 采用多媒体、视频、操作、互动等形式于1.5~2.0h内完成。可根据不同人群和实际情况适当增减, 具有内容精炼、实用性强等特

点, 还可在培训前后进行问卷调查。学过“白金十分钟”的得分比没有学过的得分高, 是对上述模式的肯定。应该大力宣传急救知识, 使大众掌握急救技能, 学会急救和互救, 创造生命奇迹^[9]。

综上所述, 完善急救“白金十分钟”理论体系, 为构建自救互救体系、战场救护体系、平战结合的战创伤救治体系提供了时效性理论基础与支持, 具有重要意义。不断把“白金十分钟”理论进行普及、实践是对这一理论的不断探索和发展。

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