Title: Automated External Defibrillators in Schools: Clinical Evidence

Date: 06 December 2007

Research question:

1. What is the evidence that automated external defibrillators are useful in the school setting?
2. Is there any evidence about lives saved with automated external defibrillators in schools?

Methods:

A limited literature search was conducted on key health technology assessment resources, including Pre-Medline, Medline, CINAHL, Embase, Pubmed, the Cochrane Library (Issue 2, 2007), University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, EuroScan, international HTA agencies, and a focused Internet search. Results include articles published between 2002 and the present, and are limited to English language publications only. Filters were applied to limit the retrieval to systematic reviews/HTA, guidelines, randomized controlled trial (RCT) and observational studies. Internet links are provided, where available.

Results:

Two observational studies and one evidence-based guideline were identified from the literature search results. No health technology assessments, systematic reviews, meta-analyses or randomized controlled trials were identified.

Health technology assessments
No literature identified

Systematic reviews and meta-analyses
No literature identified

Disclaimer: The Health Technology Inquiry Service (HTIS) is an information service for those involved in planning and providing health care in Canada. HTIS responses are based on a limited literature search and are not comprehensive, systematic reviews. The intent is to provide a list of sources of the best evidence on the topic that CADTH could identify using all reasonable efforts within the time allowed. HTIS responses should be considered along with other types of information and health care considerations. The information included in this response is not intended to replace professional medical advice, nor should it be construed as a recommendation for or against the use of a particular health technology. Readers are also cautioned that a lack of good quality evidence does not necessarily mean a lack of effectiveness particularly in the case of new and emerging health technologies, for which little information can be found, but which may in future prove to be effective. While CADTH has taken care in the preparation of the report to ensure that its contents are accurate, complete and up to date, CADTH does not make any guarantee to that effect. CADTH is not liable for any loss or damages resulting from use of the information in the report.

Copyright: This report contains CADTH copyright material and may contain material in which a third party owns copyright. This report may be used for the purposes of research or private study only. It may not be copied, posted on a web site, redistributed by email or stored on an electronic system without the prior written permission of CADTH or applicable copyright owner.

Links: This report may contain links to other information on available on the websites of third parties on the Internet. CADTH does not have control over the content of such sites. Use of third party sites is governed by the owners’ own terms and conditions.
Randomized controlled trials
No literature identified

Observational studies


Guidelines and recommendations

Prepared by:
Michelle Clark, BSc, Research Assistant
Emmanuel Nkansah, MLS, MA, Information Specialist
Health Technology Inquiry Service
Email: [htis@cadth.ca](mailto:htis@cadth.ca)
Tel: 1-866-898-8439
Appendix – Further information:

**Observational studies**

**Guidelines**

**Review articles**

*Note: see IMPLEMENTATION OF A LAY RESCUER AED PROGRAM IN SCHOOLS WITH A DOCUMENTED NEED, page e1374

**Additional references**


