Appendix C

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IN-WATER O₂ RECOMPRESSION THERAPY

AUSTRALIAN UNDERWATER OXYGEN TABLE

Notes:

- 1. It is recommended that the application of this therapy technique usually be limited to trained and experienced diving medical practitioners and paramedics.
- 2. This technique may be useful in treating cases of decompression sickness in localities remote from recompression facilities. It may also be of use while suitable transport to such a centre is being arranged.
- 3. In planning, it should be realised that the therapy may take up to 3 hours. The risks of cold, immersion and other environmental factors should be balanced against the beneficial effects.
- 4. The diver must be accompanied by an attendant at all times.

□ Equipment.

The following equipment is essential before attempting this form of treatment:

- 1. Full face mask with demand valve and surface supply or helmet with free flow.
- 2. Adequate supply of 100% oxygen for patient, and air for attendant.
- 3. Wet suit for thermal protection.
- 4. Shot with at least 10 metres of rope (a seat or harness may be rigged to the shot).
- 5. Some form of communication system between patient, attendant and surface.

☐ Method.

- 1. The patient is lowered on the shot rope to 9 metres, breathing 100% oxygen.
- 2. Ascent is commenced after 30 minutes in mild cases, or 60 minutes in severe cases, if improvement has occurred. These times may be extended to 60 minutes and 90 minutes respectively if there is no improvement.
- 3. Ascent is at the rate of 1 metre every 12 minutes.
- 4. If symptoms recur, remain at depth a further 30 minutes before continuing ascent.
- 5. If oxygen supply is exhausted, return to the surface, rather than breathe air underwater.
- 6. After surfacing, the patient should breathe 1 hour on 100% oxygen, one hour off, for a further 12 hours.

Fig. 1 App C. Breathing intermittent O2 <u>after</u> treatment





Fig. 2 App C. An Underwater O2 unit



Fig. 3 App C. A cheap full face mask. *Cressi-Sub*