
NTDB™ data points

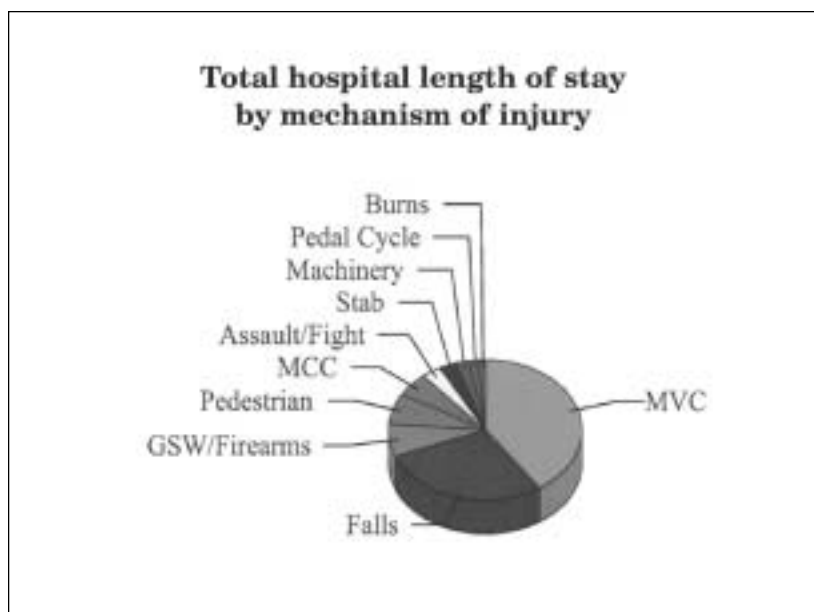
The critical aspect of blunt trauma

by Richard J. Fantus, MD, FACS, Chicago, IL, and John Fildes, MD, FACS, Las Vegas, NV

Last month we highlighted the fact that the majority of trauma records contained in the *2nd Annual Report of the National Trauma Data Bank™ (NTDB)* resulted from blunt injury mechanisms. Looking at the resource-intensive nature of trauma, it comes as no surprise that victims of significant blunt forces are a major consumer. Blunt trauma more commonly produces multiple organ system injuries when compared with penetrating trauma. These multiple blunt injuries and their sequelae often lead to intensive care unit stays. The graph at right illustrates that while motor vehicle-related injury accounted for 38 percent of trauma records, this group used more than half of all the intensive care unit days.

Being a heavy user of system resources, motor vehicle-related injury is clearly a major public health concern. Reengineering vehicle design with the advent of airbags and, more recently, the black boxes that will autodial 911 after a crash to initiate the post-trauma medical care sooner will help to lessen the impact of motor vehicle crashes.

Newer roadway designs with concrete barrier medians reduce the frequency of head-on collisions. However, once injury occurs, only so much can be done to restore the patient to their



Proportional distribution of total hospital length of stay, grouped by mechanism of injury defined in Appendix B. Total N = 250,995. Total hospital length of stay = 1,387,237 days.

preinjury state. Prevention efforts aimed at promoting seat belt use, graduated drivers licenses for new teenage drivers, and avoiding driving while impaired are of paramount importance in trying to attack this problem. There is a role each one of us can play in trying to combat motor vehicle-related injury.

Throughout the year we will be highlighting these data through brief reports that will be

found monthly in the *Bulletin*. For a complete copy of the *National Trauma Data Bank Annual Report 2002*, visit the ACS Web site at <http://www.facs.org/dept/trauma/ntdbannualreport2002.pdf>.

If you are interested in submitting your trauma center's data, please contact Melanie L. Neal, Manager, NTDB, at mneal@facs.org.