

Objectives

- At the end of this lecture the participant will be able to:
 - Describe the importance of the mechanism of injury in history taking of the trauma patient.
 - Identify patterns of injury from the type of mechanism deployed to the patient.
 - Discuss the importance of injury prevention as part of the continuum of trauma care.

Epidemiology



- Trauma: Defined as injury to human tissues and organs resulting from the transfer of energy from the environment
- Motor vehicle crash (MVC) instead of motor vehicle accident (MVA)

Incidence - United States

Incidence

- 4th leading cause of death for all ages
- 1st leading cause of death for ages 1 to 44 years

Causes

- Motor vehicle crashes
- Suicide
- Homicide and legal intervention
- Other



Human Characteristics -

- Age
- Gender
- Race
- Alcohol
- Violence



Injury Prevention and Control

- Focuses on reducing the incidence of injury events
- Injury control strategies are classified as the following interventions:
 - Engineering and technologic
 - Enforcement and legislative
 - Education and behavioral

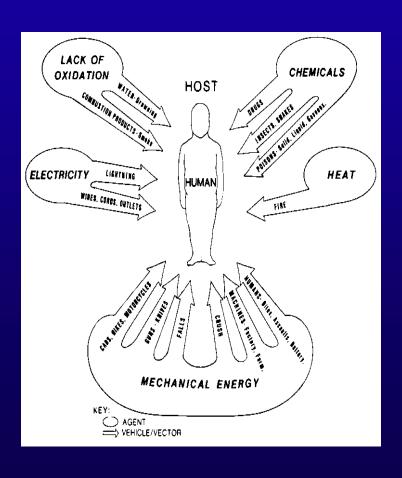
Injury Prevention and Control

- Recommendations for injury prevention
 - Enhance injury surveillance systems
 - Enhance research of biomechanics and pathophysiology and reparative processes
 - Develop national policy
 - Authorize the Health Resources and Services
 Administration to fund trauma care systems

Biomechanics and Mechanism of Injury

- Biomechanics: The study of the principles of the action of forces and their effects
- Kinematics: A branch of mechanics (energy transfer) referring to motion
- Mechanism of Injury (MOI): The mechanism whereby energy is transferred from the environment to the person

Energy Sources and Mechanism of Injury



Mechanical Energy

- Epithelial tissue: Skin, trachea, mucous membranes
- Connective tissue: Cartilage, bone, joint structures
- Muscle tissue: Cardiac, skeletal, blood vessels
- Nerve tissue: Neurons and supporting cells

External Forces

- Mechanical energy
 - Deceleration
 - Acceleration
 - Combination forces
 - Other forces

- Contributors to the amount of energy a moving object has:
 - Mass
 - Velocity (greatest influence)

Deceleration Forces

- Relative fixation of certain structures predisposes them to deceleration injuries
- Differences in the rate of deceleration of specific body parts
 - Aorta, near ligamentum arteriosum
 - Retroperitoneal duodenum, near ligament of Treitz

Acceleration Forces

Acceleration Examples

- When a stationary or slow moving pedestrian is struck by a car
 OR
- When an occupant of a slow moving car is struck from the rear by another fast moving car

Other Forces

- Amount of energy is dependent upon the velocity at which the object strikes the victim and the object's mass
- Blunt or penetrating forces
 - Bullets
 - Fists
 - Stabbing instruments
 - Blasts or explosions





Internal Forces

- Stress: Forces applied to deform the body or the equal and opposite forces with which the body resists
 - Tensile stress
 - Compressive stress
 - Shearing stress
- Strain: Tissue damage or deformation that results from the stress

Types of Injuries



- Blunt
 - Motor vehicle crashes
 - Motorcycle crashes
 - Falls
- Penetrating
 - Stab wounds
 - Firearm injuries

Gunshot Wounds (GSW)

- Firearm: Any weapon capable of firing a projectile and using an explosive charge as a propellant.
- Ballistics: In medicine, the study of wounding the body by a projectile.
- Biomechanics of tissue damage is based on the kinetic energy of the projectile and the density and elasticity of the tissue.

GSW - Ballistics

- Wound profile: the permanent and temporary cavities the projectile produces.
- Internal ballistics refers to motion within the weapon: caliber, muzzle velocity, rifling, barrel length, cartridge.
- External ballistics refers to motion of the projectile in the air: yaw, tumbling

GSW - Ballistics

- Terminal ballistics refers to motion and effect of a projectile on striking a solid or liquid.
- Projectiles dissipate a tremendous amount of kinetic energy (KE) to the tissues through which they pass and is responsible for most of the damage.
- Increasing the velocity of a projectile has a much greater effect on KE than increasing its mass.

GSW - Tissue Characteristics

- In general, the greater the density of the tissue, the more energy transferred.
- Permanent cavity: Crushed tissue of the hole or tract caused by the projectile as it moves through the tissue.
- Temporary cavity: The blast effect caused by the tissues stretching as the KE is being absorbed by them.

GSW - Shotgun





GSW - Shotgun





Stab Wounds

- Stab/Impalement wound size and history about the type of weapon used does not correlate to depth of wound or wound trajectory because the victim's or witnesses' perceptions may not be accurate.
- An impaled weapon should not be removed except in the operating room.
- 4% mortality rate is primarily from direct injuries to great vessels or the heart.

Stab vs Impalement Wounds





 Usually occurs secondary to a fall onto a piercing object or sustained from machinery or pneumatic tools, but also includes low velocity non-firearm projectiles such as arrows.



- 28 y/o male, MCC, fell into a pile of wood.
- This piece of wood entered chest behind sternum, anterior to heart. Perforated the diaphragm and passed between the liver and spleen.



- Drag racer lost control of the car and struck a chainlink fence while traveling backwards.
- Top rail of the fence entered the rear of the car impaling the driver's pelvis.
- Only sustained gluteal muscle tears.

- An impaled object should be removed only in the operating room under direct vision and after a thorough dissection of the wound tract.
- The wound can be complicated by blunt dissection from the fall, secondary injuries from extraction by untrained personnel or unintentional shifts of the object during transport.

Stab/Impalment Wounds



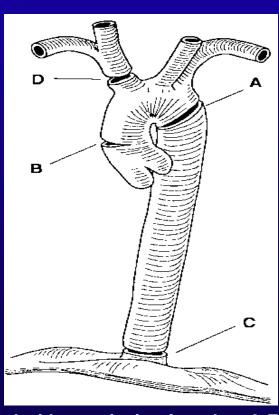
- Necrotizing fasciitis resulted from a missed rectal injury.
- Initial injury was a stab wound in the buttocks 48 hours before.
- Patient died in the OR.

- Crossbows usually unable to pass through weight bearing bone, but easily penetrates ribs, sternum, calvarium.
 Should be treated as an impalement.
- Arrows wound depends on weight and velocity of arrow and type of tip (hunting vs. target).

Forensics

- Because medical records are legal documents that can be subpoenaed by courts, all wounds must be described in a precise and accurate manner and evidence preserved.
- Wound sizes should be measured, not estimated and positions related to anatomical landmarks.

Patterns of Injury



- Age
- Mechanism of injury
- Anatomic structures involved
- Pre-existing factors

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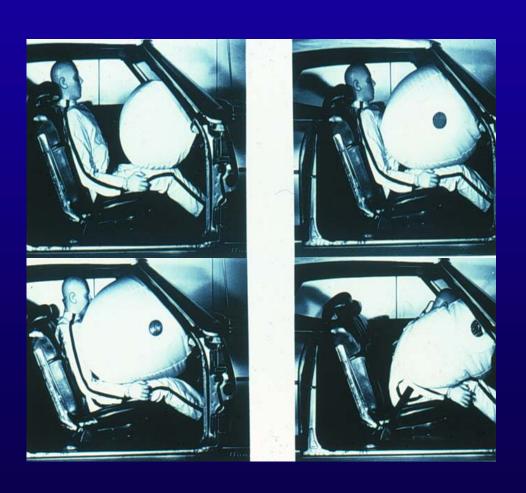
Patterns of Injury

- Possible injuries when a pedestrian is struck by a motor vehicle
 - Knees, tibia, fibula, femur, pelvis
 - Vertebral column injury
- Possible injuries for a motorcyclist
 - Face, chest, lower legs
 - Cranial and cervical injuries

Falls and Jumps

- Axial loading: Falling or jumping from a height
- Energy is applied to the axial skeleton
- Pattern of injury related to falls or jumps from heights is a consequence of several factors

Vehicular Occupant Protection



- Occupant protection technology
- Restraint systems
- Air bags: Controversial

Air Bags

National Highway Traffic Safety Administration (NHTSA) guidelines

- Driver's seat should be "rearward," tilted back; distance from the sternum at least 10"
- Wear a lap/shoulder belt
- Children 12 years and younger should ride in the back seat
- Rear-facing child restraints should NEVER be used in a seat with an air bag

Summary

