

# Extremity war injuries: More research is needed

**January 4 2010** 

The fourth annual Extremity War Injuries Symposium was held in Washington, D.C., last January to bring together military and civilian orthopaedic surgeons, researchers, experts from governmental agencies, and others to discuss challenges faced by U.S. medical personnel working in Iraq and Afghanistan and to discuss ways to synergize resources and improve care for wounded warriors. A paper summarizing the findings from the symposium is published in the January 2010 issue of the *Journal of the American Academy of Orthopaedic Surgeons* (JAAOS).

## **Majority of Trauma Is Orthopaedic-Related**

The majority of trauma that currently occurs among both military and civilians in Iraq and Afghanistan involves the upper and lower extremities, and happens as a result of the detonation of explosive devices. According to paper co-author Andrew N. Pollak, MD, Associate Professor and Head, Division of Orthopaedic Trauma, University of Maryland School of Medicine, Baltimore, MD, this year's symposium focused on three topics:

- Challenges in research
- Host nation care



• Domestic disaster preparedness

"Our military medical personnel in Iraq and Afghanistan are facing serious challenges on every level," noted Dr. Pollak. "But the most critical need right now is funding for more research, so medical personnel can offer the highest level of care," he said.

"Our goal is to provide our wounded warriors with the best care possible to improve their quality of life. Since orthopaedic injuries result in the largest source of disability cost for the government, investing to improve care should result in less expense for the taxpayers in the long run."

### **Challenges in Research**

There are several ongoing research programs, such as the Orthopaedic Extremity Trauma Research Program (OETRP), a competitive, peer-reviewed research program managed by the U.S. Army Institute of Surgical Research, which are succeeding in finding better ways to treat extremity combat victims. Examples include new ways to:

- Treat segmental bone defects;
- Prevent infection and heterotopic bone formation; and
- Improve standards of care.

"Although excellent musculoskeletal trauma care research programs like this exist," Dr. Pollak reported, "there are still significant gaps between existing scientific knowledge and the challenges presented by the clinical conditions resulting from combat activities."

#### **Host Nation Care**



The symposium also revealed important information related to host nation care capabilities. A major portion of the care currently delivered by U.S. military medical personnel is offered to the local population. In Afghanistan, this includes many enemy combatants and insurgents as well as members of the regular Afghan military forces.

"The common theme we learned is that the inherent capacity of the Iraqis and Afghans to deliver this care themselves is extremely lacking—and even absent in some areas," said Dr. Pollak. "The patient follow-up care also is not available in these countries."

#### **Disaster Preparedness**

In the area of disaster preparedness, the symposium concluded that lessons learned about the way battlefield extremity injuries are managed, as well as management of the mass casualty itself, may become valuable in the event of a future terrorist attack on U.S. soil.

For the reasons above, symposium attendees decided that:

- An examination of U.S. mass casualty civilian response in the context of a review of extremity war injuries may be incredibly valuable; and
- Emphasized the collaboration between the U.S. Northern Command and available civilian organizations should play a key role within the U.S. Disaster Response Network.

"Our goal is to ensure that if a terrorist attack were to occur on U.S. soil in the future, that our ability to respond would reflect the important lessons learned in the treatment of battlefield injury sustained in Global



War on Terror activities," reported Dr. Pollak.

Later this month, The Extremity War Injuries V: Barriers to Return of Function and Duty (EWI V) research symposium, co-sponsored by the American Academy of Orthopaedic Surgeons, the Orthopaedic Trauma Association, the Society of Military Orthopaedic Surgeons, and the Orthopaedic Research Society, will take place January 27-29, 2010, in Washington, D.C.

More information: <a href="https://www.aaos.org/warinjuries">www.aaos.org/warinjuries</a>

Provided by American Academy of Orthopaedic Surgeons

Citation: Extremity war injuries: More research is needed (2010, January 4) retrieved 25 April 2024 from <a href="https://medicalxpress.com/news/2010-01-extremity-war-injuries.html">https://medicalxpress.com/news/2010-01-extremity-war-injuries.html</a>

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