

ER study shows drop in deaths after trauma injury

August 29 2012, by Randy Dotinga, Healthday Reporter



Experts say advances in treatment, better guidelines over past decade may explain trend.

(HealthDay)—New research suggests that doctors are doing a better job of treating—and saving—emergency room patients whose injuries fall between mild and severe.

Between 2000 and 2009, the overall death rate for patients with moderate injuries who were treated in Pennsylvania hospitals fell almost 30 percent, from 7.2 percent in 2000-2001 to 5.7 percent in 2008-2009.

The findings, which appear in the August issue of the [Archives of Surgery](#), don't directly prove that better medical care boosted [survival rates](#) in these patients. Nor does the study indicate exactly what the hospitals might be doing better.

Still, the result "suggests that the quality of [trauma care](#) is improving

substantially over time," said study author Dr. Laurent Glance, vice chair for research in the department of anesthesiology at the University of Rochester School of Medicine, in New York. "It is likely that many incremental changes in medical care involving care of these critically ill patients in the [intensive care unit](#) and in the operating room are responsible for these improved outcomes."

While much attention in the United States has focused on [medical errors](#) in recent years, the study authors noted that great strides have been made in the field of medicine in terms of helping people stay alive. [Death rates](#) from heart attacks and [heart failure](#) in particular have fallen markedly over the past decade or two.

In the new study, Glance and his colleagues sought insight into whether medicine is also doing a better job of treating patients who are admitted to emergency rooms with injuries.

The researchers examined the medical records of nearly 209,000 patients who were treated for [trauma](#) in 28 Pennsylvania hospitals.

Of the patients, 61 percent to 64 percent were male, and the percentages of patients with mild, moderate and severe injuries were roughly equal, at about a third. Blunt trauma and [car accidents](#) were the most common causes of trauma, followed by gunshots, low falls, pedestrian injuries and stabbings.

The mortality rates for people with mild and severe injuries didn't change much during the study period, but those with moderate injuries were much less likely to die by 2009. The improvement remained even after the researchers adjusted their statistics so they wouldn't be thrown off by high or low numbers of certain kinds of patients.

Certain kinds of complications became more rare, too, affecting 8

percent of patients in 2000-2001 and 6.4 percent of patients in 2008-2009.

What's happening?

Dr. Matthew Ryan, an assistant professor of emergency medicine at the University of Florida, said several factors may be responsible for helping people survive trauma. For one, he said, emergency medicine doctors are better trained, and there are more standards about the care they should provide. Also, he said, trauma centers are more prepared to deal immediately with patients in dire condition.

Why didn't mortality rates change for the mildly and severely injured?

"We do not possess [the] skills, technology or aptitude to alter the outcome of patients who are mortally injured and beyond the care of our present state of the art," he said. "The least severely injured are just that, and the odds of a fatality should remain at a baseline of near zero, or highly improbable."

There are caveats, however, he said. The study looked at trauma centers, not other hospitals whose staffs may have less experience and training. However, he said, the overall good news is that "your trauma centers are well-equipped to help if you are acutely injured. Research and training over the years have prepared specialists to handle critically injured [patients](#), and we are continually improving."

More information: For more about [injuries](#), try the U.S. National Library of Medicine.

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