Trauma Debate

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Wyatt Study (Injury 1999)

Fig. 1. Excess survivors per 100 patients by grade of A&E doctor compared to UK norm.
Alternative is not an Option

- Trainees may
  - be technically good
  - know more stuff
- Trainees are not yet fully versed in the dark arts of being a consultant
Future Medical Staffing

- Less registrar based care
  - Fewer trainees
  - Training for shorter periods
  - Competency based

- Consultant delivered care will be the norm
  - Health care will improve as a result
  - Training will improve as a result
24/7 Consultants?

- Trauma demographics:
  - 70% presents out of hours
  - 300 - 400 per year
- Trauma is the tip of a resus ice-berg
  - 9,515 patients last year triage 1 and 2
- Need 24/7 front door acute care specialist
- Bad things happen in ED at night.....
Don’t Wake the Bear.....
Trauma team leader?
Or Trauma Team Leader?
The Proposition

“24/7 consultant-led trauma teams produce the best outcomes”
Before and After
The Emergency Room:

Where the true lifesaving goes on
Justifying the Proposition

- Do we need trauma teams?
- Do we need consultants to lead?
- Do we need them 24/7?
- Is there an alternative?
Do We Need Trauma Teams?

- Trauma resuscitation requires horizontal management = >1 person
Who Should Be In the Team?

- Emergency medicine / Critical care
  - Secure airway & ventilation
  - Circulatory support
  - Injury list / investigations

- Trauma surgeons
  - Rapid transit to OR
  - Formulate definitive care plan

- ED nurses (for everything!)
Do We Need Consultant-led?

- In-house consultant trauma surgeons do not affect outcome
  - Minnesota 1999
  - Delaware 2002
  - Kansas 2003

- But.. in most of these studies an ED consultant was present for all cases
ED Consultant-led Resus

ED seniority improves outcome in trauma

- UK Trauma and Audit Network (Lancet 2000)
  - odds death ratio 1997 / 1989 = 0.63
  - portion treated by senior rose from 32% to 60%

- Scottish Trauma Audit Group (Hlth Blltn 2000)
  - survival ISS>15 rose 65% (’92) to 75% (’98)
  - portion treated by consultant rose from 32% to 41%