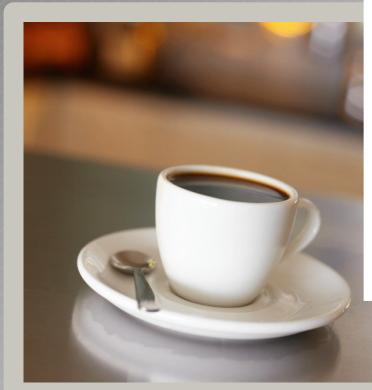
Good morning!







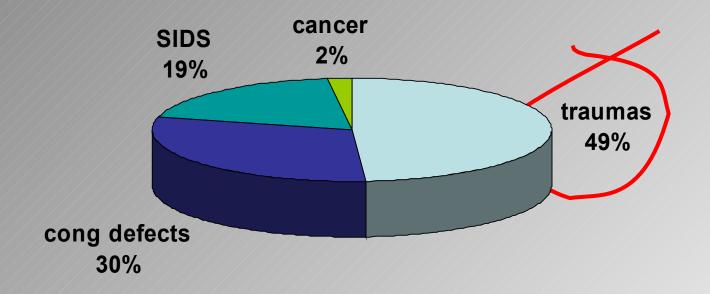
Jan Godzinski

Chair of Emergency Medicine, Medical
UniversitA and Dept Off Bediatric
Surgery, Marciniak Hospital, Wroclaw,
PEDIATRIC Land LITRAUMA



- AN OVERVIEW

causes of death in children

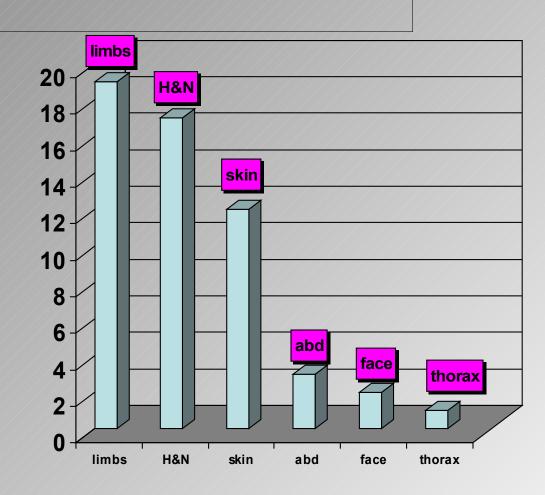


trauma in children

- related to traffic accidents (and similar causes) 44.9%
- · (all!) other 55.1%

most frequent injuries in children

- multiple 43%
- · limbs 19%
- head & neck 17%
- · skin 12%
- · abdomen 3%
- face 2.2 %
- thorax 0.9%



What is challenging?

- In terms of the survival
- 2. In terms of the functional outcome

survival

- 1. CNS
- 2. Thorax
- 3. Major vessels
- 4. Abdomen
- 5. Genito-urinary
- 6. Muscles and bones
- 7. Peripheral nerves

CNS

• Injury of head or brain??

· 85% are minor injuries

· history

· observation

 \cdot CT

· Xray?

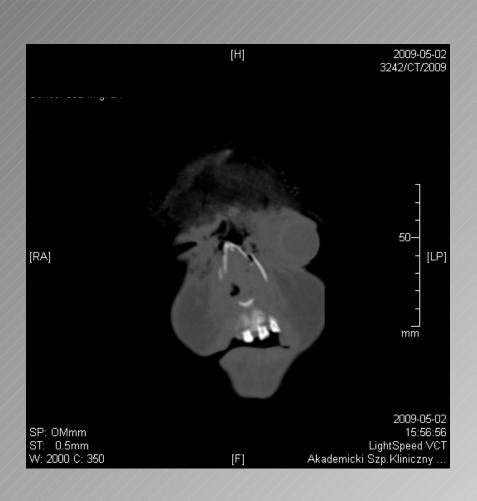
Cranial fracture and perirenal haematoma

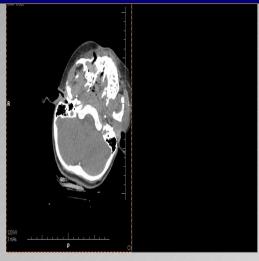


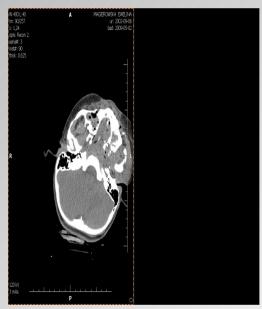




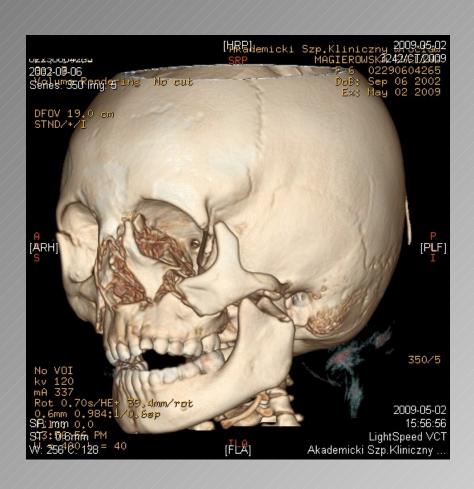
Extensive fracture of the orbit, mandible and zygomatic bone, leak of the C-S fluid

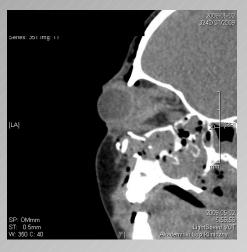


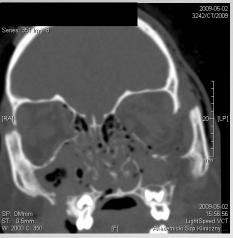




Extensive fracture of the orbit, mandible and zygomatic bone, rather function importance





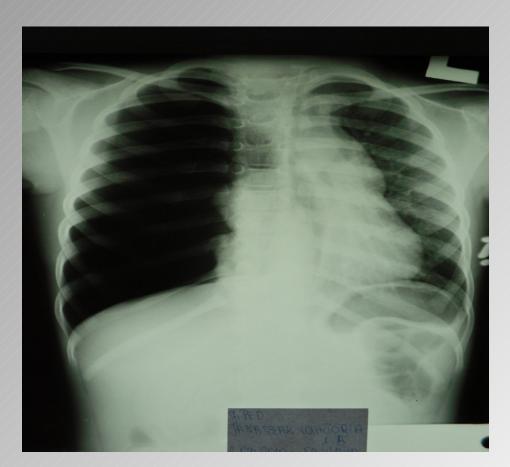


thorax

- · contusion
- (tension) pneumothorax (note 90% "idiopathic, not trauma – related)

 heart - extremely rare (do not forget the hematoepricardium – heart tamponade)

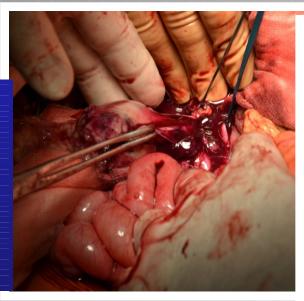
- · history
- physical examination
- · blood gases
- Xray (CT: whether we need it always?)
- thoracic drainage
- · thoracotomy



vessels

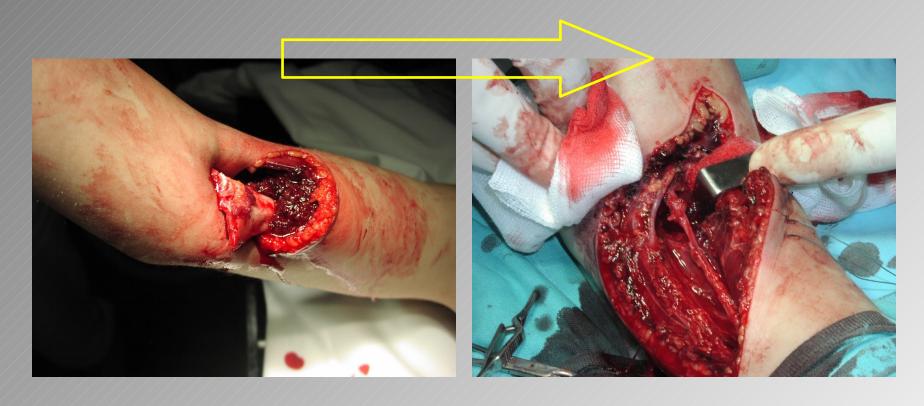
- Massive bleeding more frequent from ruptured organs than from vessels
- · Trauma-related is 2-times less frequent than iatrogenic

v. cava rupture and reconstruction following nephrectomy due to grade 5 injury ofthe right kidney





Vascular injuries – more frequent in case of major trauma of the proximal parts of limbs



brachial artery section and supracondylar open fracture: pre-op and post-reconstruction pictures

- · Assess the bleeding
- Is it a case of an acute ischemia of the limb?
- Stop the bleeding with dressing or Esmarck as shortly as it is possible -
- Write down the time of the accident (duration of ischemia)
- · Reconstruction of vessels or .. amputation

abdominal trauma

- Blunt or penetrating
- Related to traffic accidents or not
- Associated with CNS injuries or not
- Favourable prognosis or fatal prognosis

Most frequently

abdominal trauma

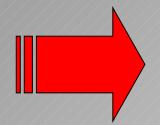
- Blunt or penetrating
- Related to traffic accidents or not
- Associated with CNS injuries or not
- Favourable prognosis or fatal prognosis

Marciniak Hospital (85-bed Dept. Of Pediatric Surgery) Wroclaw:

over:

- · 6000 admissions a year
- 5000 operations and other interventions under general anaesthesia a year

40% of patients admited for trauma



Since > 12 years there were 2 deaths of patients with abdominal trauma not associated with serious CNS injury, other associations matter less

abdominal cavity

- Nearly only blunt (87%)
- · Alimentary tract
 - Perforations immediate (penetrating trauma) or delayed (blunt)
 - Free air (stomach, large bowel) pneumoperitoneum
 - Air in the retroperitoneum (duodenum, rectum)
 - Mesenteric and intra parietal hematomas
 - USG/CT haematoma visible =/- hematoperitoneum
 - X-ray ileus

- Immediate haemorrhage from the intra-abd organs (liver, spleen, kidneys, pancreas/duodenum), main vessels and mesenteric vessels
- Delayed results of crushing (pancreatic pseudocyst, urinoma, bile leak*)



perforation of the large bowel, free air in the abdomen

Rupture of duodenum, air in the retroperitoneum, contusion of the head of pancreas and right kidney, accuracy of CT



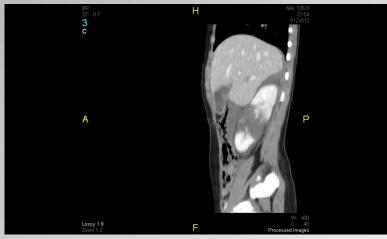


Rupture of the right kidney and contusion of the pancreas

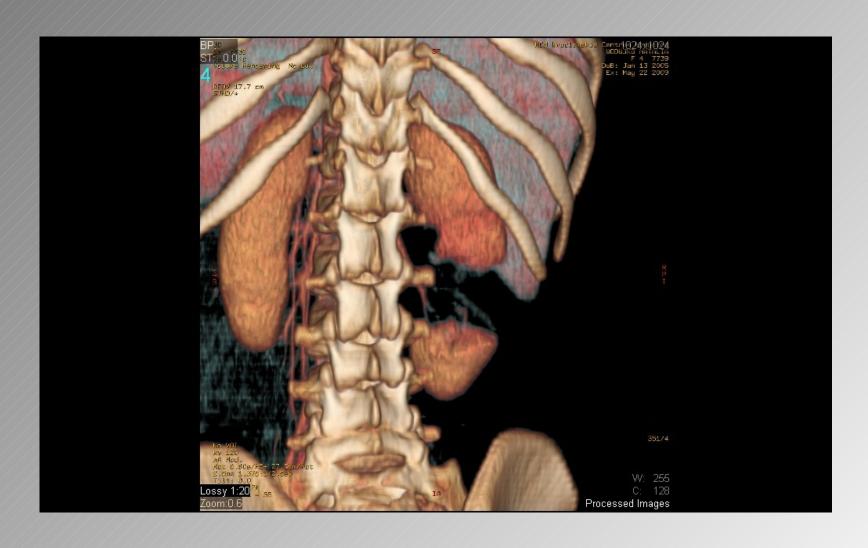








Rupture of the right kidney and contusion of the pancreas



Imaging

- · X-ray
- · Usg



Note:

- very early imaging may not evidence all the injuries
- this does not mean that we shall delay the diagnostics * we shall consider repeated examinations

Interventions

- · Laparotomy
- · Lavage
- · Laparoscopy

Interventions

· Laparotomy

If the injuries are clearly defined (pneumoperitoneum, intra-abd haemorrhage, peritonitis, extensive rupture of the intra-abd or/and retroperitoneal organs)

· Lavage

 Search for reasons either for laparotomy or wait-andsee policy, never really sure, usually requires GA in children

· Laparoscopy

- Same harm to the child as lavage and much better exploration, some repaires and immediate conversion to open surgery possible; ? a risk of gas embolism in case of major vascular injuries ?

Interventions

· Laparotomy

If the injuries are clearly defined (pneumoperitoneum, intra-abd haemorrhage, peritonitis, extensive rupture of the intra-abd or/and retroperitoneal organs)

Lavage

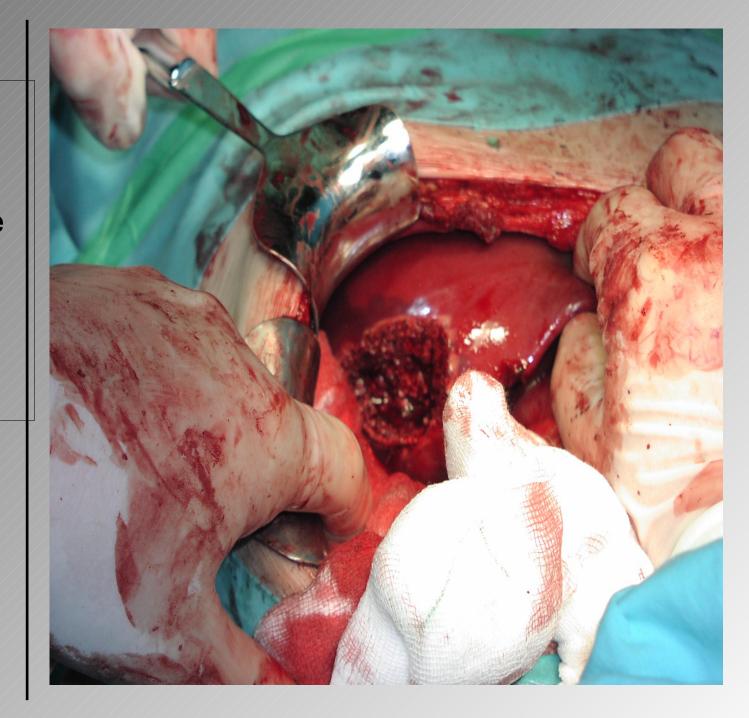
see policy, never really sure, usually requires GA in children

Laparoscopy

 Same harm to the child as lavage and much better exploration, some repaires and immediate conversion to open surgery possible; ? a risk of gas embolism in case of major vascular injuries ?



Dissection of the contusion area in the liver — bleeding control - complete



Bones and muscles

- fractures
- · compartment syndrome
- · mm injuries open or crushing
- · Injuries of tendons
- Luxations (rare in childhood)
- · "Decolage"
- · Impact of associating vascular and nerve injuries

CNS

thorax vessels

- abdomen
- G-U
- Mm and bones
- Peripheral nerves

75%

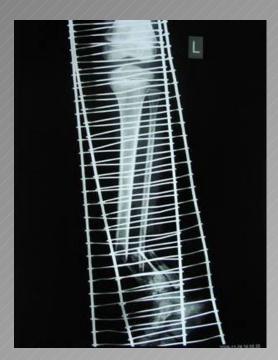
- death
- variety of non fatal consequences of trauma and complications



rather functional outcome raleted challanges, but not only



6-year-old boy hit by the tramway, resuscitated when under the tramway for the tome necessery to lift the wagoon, Hb at admission=2.4 !!!!!!!!











The only blood supply – in red, HBO support – finaly – progresing necrosis and amputation





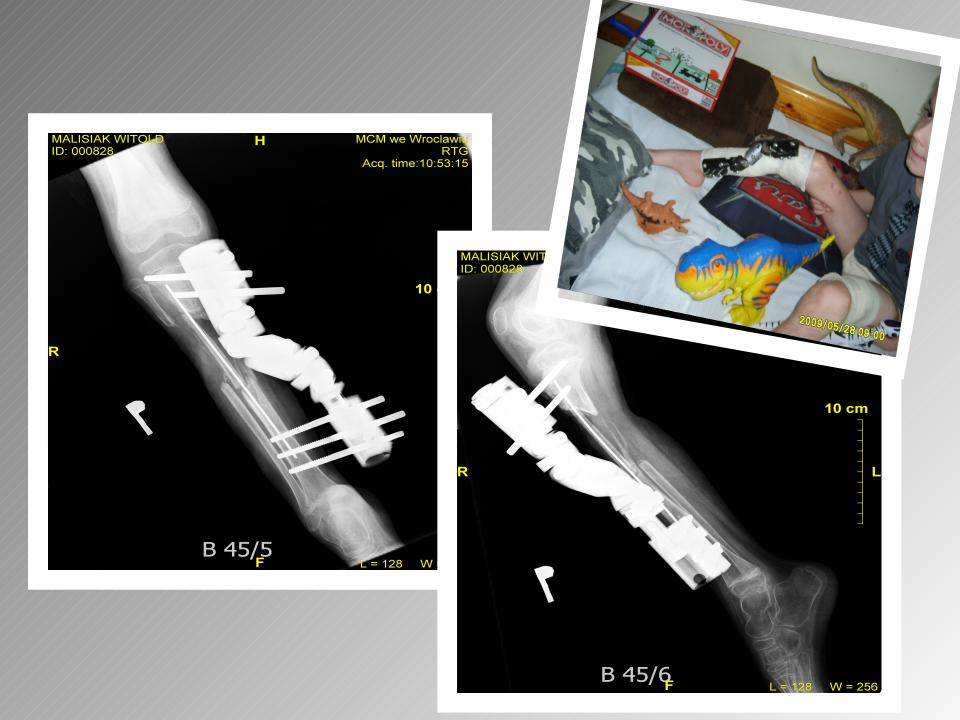


the "better" leg









1 year later





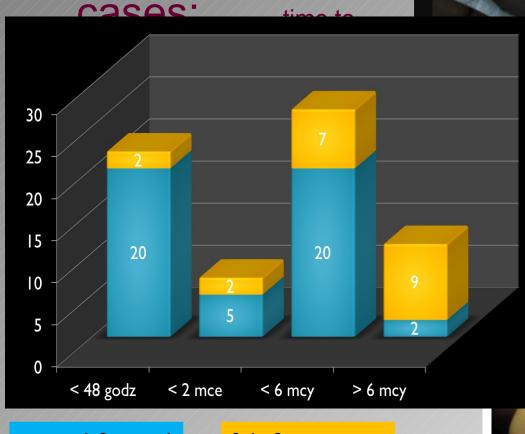


· CLASSICAL FUNCTIONAL ISSUE:

THE Nerve injuries

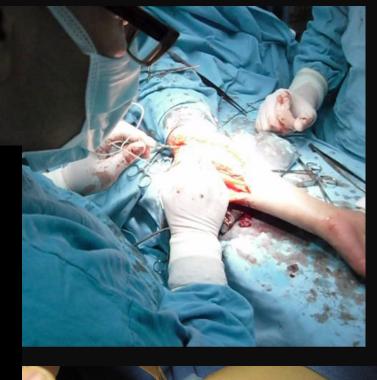
· Identify and repair – best imm

Our data: 72

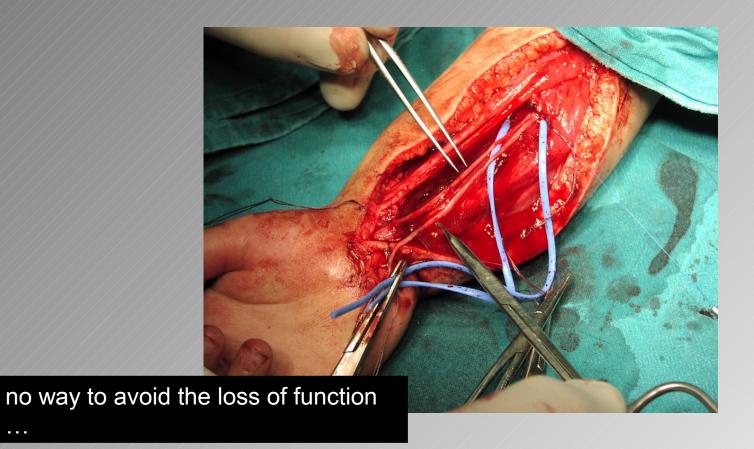


v.good & good

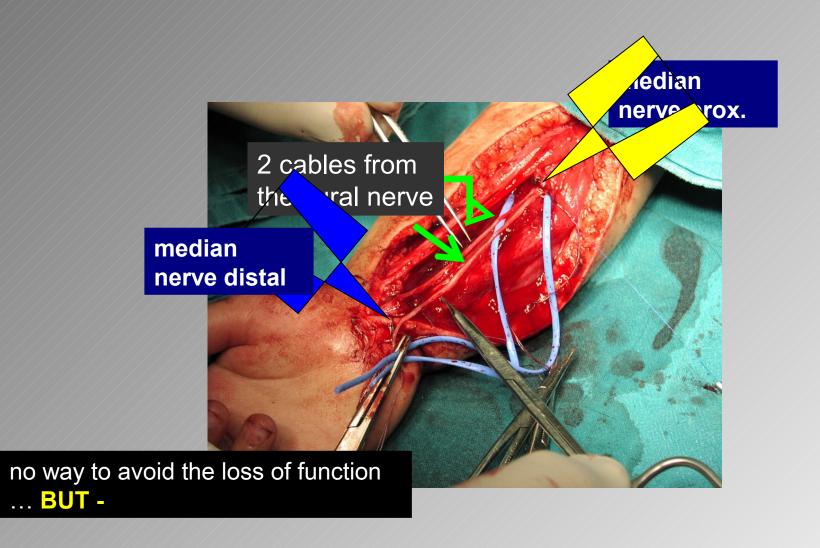
fair & poor



avulsion of the distal median nerve



avulsion of the distal median nerve

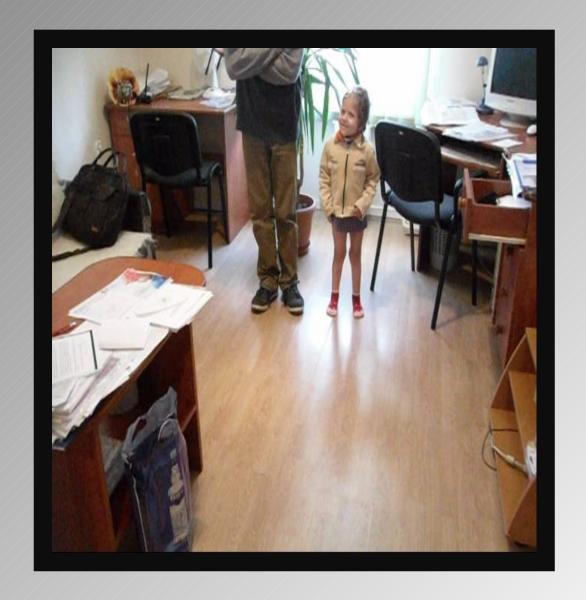




We like it!



the take-home message: children never give-up!!!







feel invited to Poland !!!