

## Unit Objectives

- **Upon completion of this chapter, you should be able to:**
  - Recognize the magnitude of traumatic injury as a public health problem.
  - Compare and contrast incidence and prevalence.
  - Describe the mathematical concept of rate, and define mortality and morbidity rates.
  - Explain the importance of surveillance of injuries, surveillance methods, and E-codes and N-codes.
  - Discuss the financial and human cost of trauma.

Chapter 1. Epidemiology of Trauma





## Unit Objectives continued

- Calculate life years lost and years of potential (or productive) life lost.
- Describe the major causes of injury mortality and morbidity in the United States.
- List the basic facts of motor vehicle crashes, including motorcycles, bicycles, pedestrians, as well as the impact of alcohol on motor vehicle injuries and deaths.
- Describe the epidemiology of drowning and water-related activities, fires, burns, fireworks, falls, poisonings, occupational injuries, firearm deaths, homicide, and suicide.

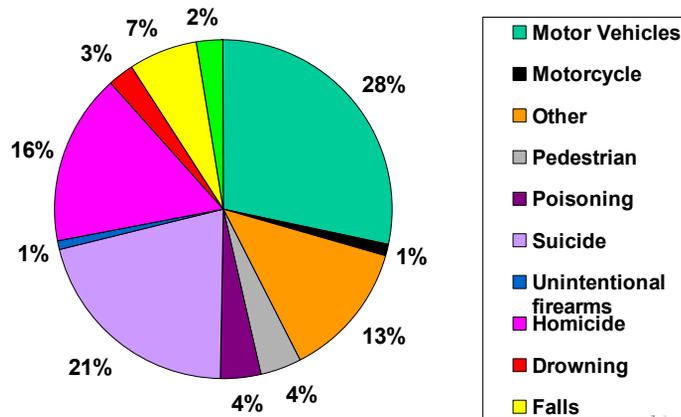


## Injury is a Public Health Problem

- Leading cause of death for ages 1-34
- Second leading cause of death for ages 35-44
- 150,000 die each year
- Major causes:
  - MVC
  - Suicide
  - Homicide
  - Fires, drowning, falls and poisoning

# Injury is a Public Health Problem

Major Causes of Injury Mortality (1995)



Chapter 1. Epidemiology of Trauma

5

# Injury is a Public Health Problem continued

- Homicide is the #1 cause of death in young African-Americans
- Had trends in homicide continued, homicide would have surpassed MVC as #1 cause of death in all groups by 2003
- 40% of all non-fatal ED visits are trauma-related
- Injury more common among males than females

Chapter 1. Epidemiology of Trauma

6



## What is Epidemiology?

John Snow-Broad Street Pump

# Outbreak



- John Snow, cholera, and the Broad Street well
- Components
  - Measurement of frequency
  - Distribution
  - Causes



## Epidemiology of Injury

- Assumptions
  - Injury does not occur at random
  - Causal and preventive factors that can be identified
- Measures of frequency

$$P = \frac{\text{number of injuries}}{\text{total population}}$$

$$I = \frac{\text{number of new cases}}{\text{total population at risk for a specified time period}}$$

## Mortality and Morbidity

$$\text{Morbidity rate} = \frac{\text{new cases of nonfatal injury}}{\text{total population at risk}}$$

$$\text{Mortality rate} = \frac{\text{new cases of fatal injury}}{\text{total population at risk}}$$

- May be expressed as crude rates or category-specific rates
- The “Tip of the Iceberg”



## Injury Surveillance

- Systematic collection of information on occurrence, outcome, and cost of injury
- National Highway and Traffic Safety Administration (NHTSA)
- National Transportation Safety Board (NTSB)
- National Electronic Injury Surveillance System (NEISS)



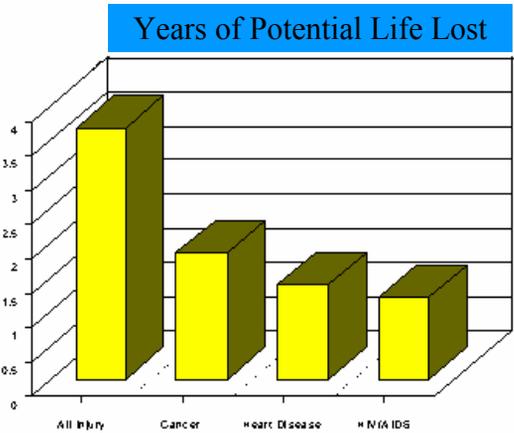
# Injury Surveillance continued

- International Classification of Disease (ICD)
  - E-codes
    - External cause of injury
    - Place of occurrence
  - N-codes
    - Specific injury
  - Used by trauma registries
  - Role of EMS in data collection



# The Cost of Injury

- 2/3 paid by private insurance
- 1/3 paid by federal, state, and local governments
- MVC injuries most costly
- YPLL and LYL
- In U.S. trauma is #1 cause of YPLL
- \$224 billion (1994)





## Injury Mortality and Morbidity in the U.S.

- **MVC Injuries**

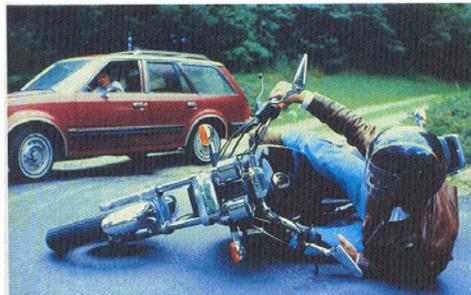
- Highest rates among young (15 - 24)
- Predominately male
- Leading cause of head and spinal injury
- Role of alcohol
- Speed limits
- Occupant protection
- Roadway improvements



## Injury Mortality and Morbidity in the U.S. continued

- **Motorcycle Injuries**

- 1,700 motorcycle deaths in 1994
- Over half of fatalities are from head injuries
- Unequivocally, helmet laws work



## Injury Mortality and Morbidity in the U.S. continued



- Pedestrian Injuries
  - 6,000 pedestrian deaths in 1995
  - Pedestrian deaths declining overall
  - Highest rates in the over 80 age group

## Injury Mortality and Morbidity in the U.S. continued

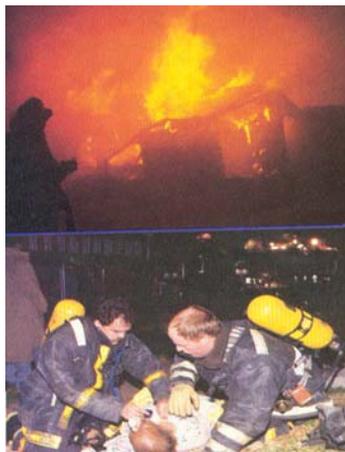
- Drowning and Water-Related Injuries
  - 4,350 drownings in 1995
  - Steady decline in all age groups
  - Alaska has the highest drowning rate
  - Accounts for 90% of all recreational boating deaths
  - High number of tub and bucket drownings





## Injury Mortality and Morbidity in the U.S. continued

- **Fires and Burns**
  - 20,000 fire-related deaths between 1992 and 1997
  - House fires are #1 cause
  - 2/3 of house fire deaths are due to smoke inhalation
  - Children, elderly, and males at greater risk



## Injury Mortality and Morbidity in the U.S. continued

- **Falls**
  - 12,000 deaths in 1998 due to falls
  - most fall deaths occur in the elderly
  - falls in sports



# Injury Mortality and Morbidity in the U.S. continued

## • Firearms

- Suicide, homicide, and unintentional injury
- Firearms deaths will outpace MVC deaths by 2003
- Nearly 32,000 firearm deaths in 1997
- Overall fatality rate is 15 per 100,000
- 170 per 100,000 for black males
- Firearm injuries cost \$20 billion per year, 80% of which is paid for with taxpayer dollars

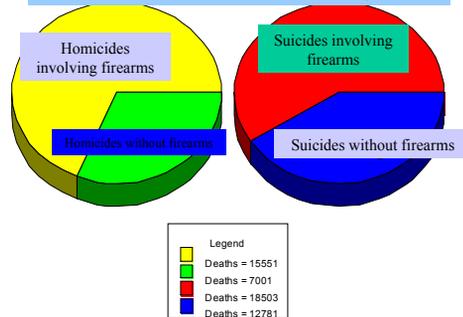


# Injury Mortality and Morbidity in the U.S. continued

## • Firearms continued

- U.S. firearm deaths are highest in the world and 8 times higher than the next closest country
- A gun in the home is 43 times more likely to kill a family member than an intruder
- A home with a gun is 5 times more likely to be the scene of a suicide and 3 times more likely to experience homicide

Homicides, Suicides, and Firearms:  
The Number of Deaths in the U.S., 1997

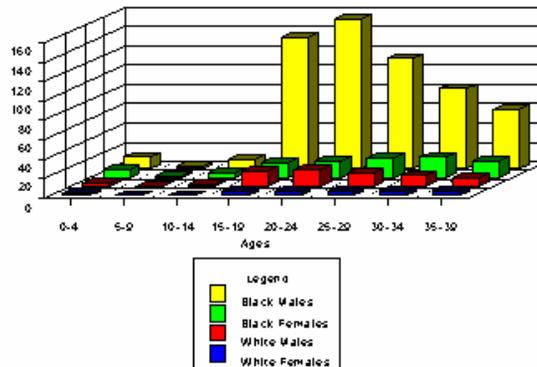


## Injury Mortality and Morbidity in the U.S. continued

### • Firearms continued

- Roughly 1/2 million non-fatal firearm injuries per year
- 1/4 of all gun owners store them loaded and in an unlocked area
- Used in 70% of all homicides

### Homicide Death Rates by Race and Sex Per 100,000 population, 1995



## Highlights of Epidemiology of Trauma

- A public health crisis
  - Morbidity and mortality
  - Financial cost
- Leading cause of death of 1-34 age group
- Accounts for 40% of all non-fatal ED visits
- At risk population
  - Young
  - Male
  - Minority
  - Lower SES
  - Intoxicated