

OUR EXPERIENCE IN TREATING ELDERLY POLYTRAUMATISED PEOPLE

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INTRODUCTION: VICTIMS OF SIMULTANEOUS AND POLIVALENT TRAUMATIC LESIONS, WITH MULTIPLE ETIOLOGY AND TOPOGRAPHY, PRESENT, PHYSIOPATOLOGICAL SPEAKING, A SYNTHESIS OF PATOGENIC CORELATIONS OF ALL ORGANS INVOLVED; THE MORTALITY IN THESE CASES ARE UP TO 14% IN SPECIALISED TRAUMA HOSPITALS AND EVEN HIGHER FOR OLD PERSONS.

OBJECTIVES: WE ASSESSED THE MORTALITY RATE, TIME OF HOSPITALISATION, RATE OF COMPLICATIONS, FUNCTIONAL RECOVERY OF ELDERLY PATIENTS. WE TRIED TO ESTABLISH A PROTOCOL FOR TREATING THESE POLYTRAUMATISED PATIENTS.

MATERIAL AND METHOD: BETWEEN 2009-2012 42 OLD PATIENTS POLYTRAUMATISED (INCLUDING FRACTURES OF THE EXTREMITIES) WERE ADMITTED IN OUR CLINIC WITH A MEAN AGE OF 75,4 YEARS (69-86 YEARS). IN 35 PATIENTS WE USED SURGICAL TECHNIQUES FOR FRACTURES TREATING AND IN 7 CASES CAST IMOBILISATION. SURGICAL TREATMENT HAS BEEN USED IN EMERGENCY FOR 24 PATIENTS AND DELAYED FOR A MEAN 9,4 DAYS (1-17 DAYS) IN 11 PATIENTS. IN ALL 24 PATIENTS TREATED IN EMERGENCY A MULTIDISCIPLINARY SURGICAL TEAM (GENERAL SURGERY, NEUROSURGERY, THORACIC SURGERY, ORTHOPAEDIC SURGERY) WAS NECESSARY DEPENDING ON ORGANS INVOLVED. IN DELAYED CASES THE ORTHOPAEDIC SURGICAL TREATMENT CONSISTED IN CAST OR TRACTION IMOBILISATION IN EMERGENCY AND AFTER PATIENT STABILISATION BY THE OTHER SURGICAL SPECIALITIES DEFINITIVE FRACTURES FIXATION WAS USED. IN ALL CASES WITH UNSTABLE PELVIC FRACTURE WE PERFORMED EXTERNAL FIXATION WITH/WITHOUT ILIOSACRAL SCREW IN EMERGENCY. THE FOLLOW-UP WAS 2 YEARS.

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RESULTS: THE MORTALITY RATE WAS 22% (9 PATIENTS); WE FOUND A HIGHER RATE OF DEATH FOR PATIENTS WHO RECEIVED DELAYED TREATMENT. THE PERIODE OF HOSPITALISATION WAS IN AVERAGE 24 DAYS. THE FUNCTIONAL RECOVERY WAS VERY GOOD IN 21 PATIENTS, GOOD IN 4 PATIENTS AND POOR IN 8 PATIENTS.

CONCLUSIONS: IN ELDERLY POLYTRAUMATISED PATIENTS THE MORTALITY RATE IS HIGHER THAN IN YOUNGER PEOPLES. THE SURVIVAL RATE DEPEND ON RAPIDITY OF DIAGNOSIS AND TREATMENT, EXISTENCE OF WELL-TRAINED MULTIDISCIPLINARY SURGICAL TEAM, THE QUALITY OF NURSING PROCEDURES. THE POURPOSE OF SURGICAL TREATMENT IS TO ALLOW RAPID MOBILISATION OF THESE PATIENTS.

KEYWORDS: ELDERLY, POLYTRAUMATISED, SURGICAL, MORTALITY