

Seat Belt Use by Pregnant Women: A Necessity, or a Risk?

Dr. Waldemar Machala

Lodz, POLAND

In most countries, seat belts and head restraints are the only elements of vehicle equipment the use of which is defined by the Traffic Code. The analysis of car accident statistics and of survival statistics of their victims indicates the necessity to use seat belts by all people in the car (the driver and all passengers). The use of seat belts by pregnant women should also be considered necessary, despite the fact that the Polish Traffic Code exempts them from this requirement. The risk of injury to the pregnant woman and the fetus induced by properly used (fastened) seat belts is much lower than is the risk of injury caused by sudden deceleration resulting from abrupt braking or a collision of the vehicle which she is in. The paper also presents the current legal status relating to seat belt use in Poland and in the world, and presents the criteria of safe child transport in the car.

Key words: children; code; fetus; pregnancy; restraints; seat belt; traffic; utilization; women

E-mail: wmanesth@ld.onet.pl

Prehosp Disast Med 2001;16(2):s45.

Mass Gathering Medical Care in the Stockholm Area: A Review

Lennart Malmstrom,¹ Eva Fellenius,² Hikan Lindberg³

1. Head of Department of EMS, Karolinska Hospital, Stockholm, SWEDEN
2. Head of Department for Disaster Medical Planning, Stockholm County Council, Stockholm, SWEDEN
3. Deputy Head of Department for Disaster Medical Planning, Stockholm County Council, Stockholm, SWEDEN

Introduction: Festivals, fairs, concerts, parades, and rallies are some of the many events that cause large numbers of people to gather in one place. Whether the event lasts a day or a week, it is evident that the people attending may require organized medical care. Most of the medical needs are minor, but cardiac arrests and other serious medical problems, including trauma, must be dealt with by the medical team. Careful planning and integration of emergency physicians' efforts with local hospitals and the emergency medical services system allow for an optimal delivery of health care, from the routine incident to a mass-casualty event.

Objective: The purpose of this report was to try to critically review the provision of medical care at mass gatherings in the Stockholm area. Specially measured was the relationship between the size of a mass gathering and the frequency of patients seeking medical aid and the effects of certain event characteristics on the relationship.

Conclusions: Type of event, weather conditions and the size of the mass gathering have a significant effect on the numbers of spectators seeking medical care. Mass casualty incidents provide valuable lessons for the prehospital provider.

A reevaluation of large-scale rescue operations that require a complex network of agencies, communications, and on-scene triaging, frequently exposes common weaknesses and errors. The report tries to provide guidelines for more effective mass casualty management.

Key words: evaluation; management; mass gathering; medical care; planning; prehospital; rescue

E-mail: lennart.malmstrom@ks.se

Prehosp Disast Med 2001;16(2):s45.

River Navigation Disasters and First Aid Organization

Mireille Marcon

SAMU de Lyon, Hôpital Edouard Herriot, Lyon, FRANCE

River traffic has been constantly increasing in the area of Lyon. The transportation of goods especially in petro-chemistry, remains the most significant part of this traffic, because of the important economic activity. Additionally, other types of leisure and tourism activities—riverboat tours, cruises, boat rentals, pubs, and disco boats—have expanded greatly. Thus, the probability of a river disaster involving a large number of victims must be considered.

Firemen are responsible for victim evacuation. In case of such an accident, the victims could be dispatched on the riverbanks at an appropriate distance down river. Outside of urban areas, access to the site might be difficult for assistance coming from land.

The location of the first aid post is of considerable importance, so that early first treatment can be delivered. It should be situated close to a place where boats can moor alongside, near the crash spot, and also should have an easy access by way of land. It should be next to a bridge down river. A second first aid post should be located at the opposite of the first one, on the other bank and so, reducing the waiting period before first medical treatment can be given. It also might be useful that a medical team be dispatched further down stream, close to a bridge. The Evacuation Medical Center should be located, if possible, next to the bridge on the evacuation way to the different hospitals. Without a prepared emergency plan, a previous coordination meeting should be organized. The rescue teams must be given the opportunity to evaluate the topography of the area where the first aid post and the Evacuation Medical Center should be installed.

Key words: accidents; evacuation; first aid; planning; rescue; river; teams; transportation

Prehosp Disast Med 2001;16(2):s45.