

ADVERSE OUTCOMES FOLLOWING THE MANAGEMENT OF TRAUMATIC INJURIES IN THE SOUTH WEST REGION OF CAMEROON

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Introduction: Unintentional and intentional injuries are major causes of disability and mortality worldwide. Globally, 973 million people sustained injuries that warranted some healthcare and 4.8 million people died from injuries. Lack of appropriate prehospital care, untrained medical personnel, limitation in medical, technological and human resources and the poorly organized health system are well known determinants of adverse outcome. In Cameroon data on injuries and outcomes are scares, this is more peculiar in the South West region of the country.

Materials and methods: This was a one year hospital-based retrospective study that was carried in the surgical wards of BRH and LRH from January 2022 to March 2022. A data collection form including demographic data, background, clinical characteristics, and outcomes were used. Collected data were stored confidentially on a computer and analyzed using SPSS version 26.

Results:950 files were selected, 269 files were included. The prevalence of admission of patients victims of injury at BRH during the study period was 38.16% and was 61.83% at LRH. Male were more affected (74.4%) and the most representative age group was 19 to 36 years old (43.5%). Road accident was the most common (59.6%), followed by falls (17.1%), assaults (12,1%) gunshots (6.7%) and burns (4.6%). 251(37.13%) patients had poor outcomes in course of this study including 13.02% cases of wound infection and 6.08% of death. Other complications included Disabilities at 11.69% amputations 2.51%, depression 0.59%, Re-operation 1.33%, non-union 0.44% and mal union 0.44%. The mean hospital stay was 12.15 ±18.64 days and the overall mortality was 6.08%. (Table 1).

Table I: Adverse outcomes following injury

Outcomes	Frequencies	Proportions
Amputation	17	2.51
Infection	88	13.02
Death	41	6.08
Depression	4	0.59
Admission to ICU	3	0.44
Re-operation	9	1.33
Disabilities	79	11.69
Referred	4	0.59
Unknown	18	2.66
Uneventful	407	60.21
Mal union	3	0.44
Non-union	3	0.44
TOTAL	676	100.0

Discussion / Conclusion:This study has shown delayed intervention, non-medicalized transportation, the type of injury, high Injury Severity Score, length of hospital stay and associated significant severe injury were statistically significant determinants of poor outcomes. The effect of the NO-SO crisis on injury is significant for some aspects. Updated standards in approach of trauma cases, diagnosis and management are needed to improve outcomes.