

PAEDIATRIC CASUALTIES

from the mountains of Snowdonia



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INTRODUCTION:

Snowdonia National Park (SNP) is a popular family holiday destination and some of the mountain users who require help for injury or illness are children. We wished to determine the nature of paediatric mountain casualties from a UK National Park.

METHODS:

The database of casualties brought to our ED (or who would have but for bypass to MTC) following assistance from Mountain Rescue (MRT) and/or Search & Rescue (SAR) helicopter between March 2004-1st April 2017 was interrogated. Casualties under 18 were identified and clinical records and MRT reports analysed.

METRICS ANALYSED:

1. Gender of patients
2. Age at presentation
3. Activity at time of injury
4. Type of Injury/injuries sustained were obtained and categorised.
5. Disposition of patient

RESULTS:

1419 cases on database > 156 under 18 years of age

53% 47%



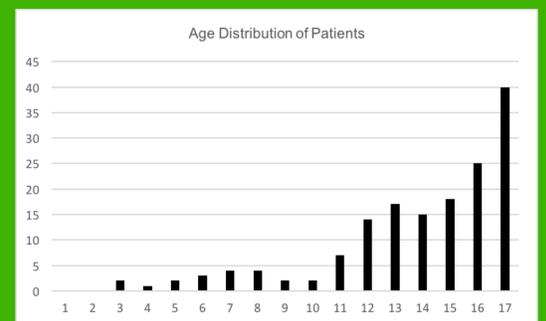
Top 3 activities at time of injury:
1. Hillwalking (78%)
2. Scrambling (6%)
3. Gorge scrambling (5%)



Most kids were discharged home (106/ 68%). 37 (24%) were admitted and only three (2%) transferred to other hospitals.



Five children died, or were dead on arrival. Three children drowned; one died of head injury, and one of hypothermia and respiratory failure.



Mean age = 13.9 years
Mode age = 17 years

The top five diagnoses for patients on our database were:

1. Soft tissue injury (32%)
2. Fracture (13%)
3. Head injury (10.7%)
4. Wounds (10.7%)
5. Medical causes (10.1%).

DISCUSSION:

Paediatric mountain casualties brought to the ED increase in number with increasing age. This is most likely due to increased participation in potentially hazardous activities as children get older, however, small children are portable, and if their parents manage to self-rescue, they would not be captured by our database.

The top two activities at time of injury (hill walking, scrambling) are reflective of SNP leisure usage. Gorge scrambling, however, is not a majority activity: its appearance here reflects its popularity with school/youth groups.

CONCLUSIONS:

Paediatric mountain casualties form only a fraction of a percent of workload for our ED, and most are not seriously ill or injured. However, they represent 11% of the casualties that Mountain Rescue Teams (MRT) and Search and Rescue (SAR) helicopter paramedics bring to our Emergency Department in Bangor.

Moving forward, this data will continue to help inform the training needs of the MRT and SAR teams.