

Outcome of Moderate and Severe Traumatic Pediatrics Brain Injury; A 5 Years Single Centre Data Collection in Developing Country

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Introduction

Traumatic brain injury is well known as a major cause of death among children over 1 year of age. Head injury is responsible for both primary and secondary brain damage. Long complication can lead to severe disability which in turn increase the burden to the family, community and health care services. The objective of this data collection is to analyse the outcome of patients with severe traumatic brain injury in our centre for the past 5 years.

Methods

This is a prospective and retrospective data collection of all patients with traumatic brain injury that admitted to our paediatrics ICU in Sarawak General Hospital, Malaysia since 2013 till January 2018. The abstract. Data collections done using the case notes, laboratory results and vital charts. Data analysed using SPSS and Numbers. The outcome is of these patients are analysed using Glasgow Coma Scale (GOS) and Modified Rankin Scale (MRS) upon discharge and 6 months after trauma.

Results

A total of 42 patients admitted during that period with age range of 1 month to 12 years old. Gender distributions are equal among the patients admitted but male patient tends to be older comparatively to female patients. The longest admission to ICU is 4 months while the shortest is only 1 day. Out of the 42 patients, 4 patients (10%) passed away during the course of their admission in the hospital. The GOS and MRS score of these patients shows improvement 6 months upon discharge but majority of them sustained some permanent intellectual and motor deficits.

Conclusions

The outcome of traumatic brain just in children are surprisingly good. However, review of our data shows that it is possible to reduce the mortality and morbidity of these patients. The economic burden and lost of potential nations future are profound especially in these preventable cases.

Learning Objectives

Prevention can act as one of the method in reducing these morbidity.

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