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Management of Thoracic Traumas: Analysis of Conscription Time

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Objectives: Trauma is the most common cause of death. Chest traumas are two-thirds of all traumas and the mortality is second after head injury. The purpose of this study is to determine the diagnosis, survival and treatment methods of chest traumas in a single-center.

Methods: Between 01.08.2017 and 01.02.2019, all patients with thorax trauma admitted to the emergency service of our hospital and needed hospitalization were retrospectively reviewed with age, gender, additional systematic injuries, diagnosis, type of treatment, length of hospital stay.

Results: 65 male and 25 female patients were evaluated with ages ranging from 8 to 90 years (mean 41.43). There were 76 blunt and 14 penetrating injuries. Etiological factors were fall in 23, motor vehicle accidents in 46, assault in 8, stab wound in 11 and gunshot in 2 cases. 43 patients had pneumothorax, 31 hemothorax, 46 rib fractures, 59 pulmonary contusion, and 4 sternum fractures determined. 74 patients followed up conservatively, chest tube insertion applied in 16 patients. 1 patient underwent operation because of lung laceration and 1 patient had diaphragm repair after a stab wound trauma. There was no mortality. The mean length of hospital stay was 3.56 days (min:2, max:9) in blunt and 3.71 days (min:2, max:10) in penetrating traumas.

Conclusion: Thoracic traumas are life threatening injuries and should be treated immediately. Identification and severe of injury is the guide of the treatment modality.

Keywords: Chest traumas, penetrating, pneumothorax, hemothorax, pulmonary contusion, rib fracture