

THE EUROPEAN SOCIETY FOR EMERGENCY MEDICINE



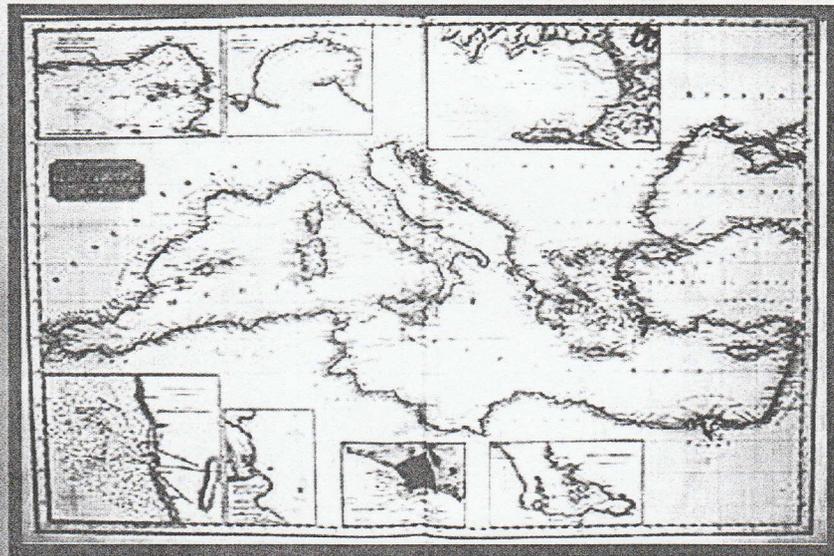
Sociedad Española de Medicina de Urgencias y de Emergencias



*when minutes count*

# THE SECOND MEDITERRANEAN EMERGENCY MEDICINE CONGRESS

SITGES/BARCELONA, SPAIN  
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## SYLLABUS

Edizioni Scientifiche MAF Servizi

mainland for a fellowship or to practice emergency medicine was 12.

### CORRELATION OF STRESS HORMONES AND LEVELS OF ANXIETY IN INTERN DOCTORS WHO START EMERGENCY DEPARTMENT

GUNAY N, YÜLDÜRÜM C, GUNAY N, KOCA R, KOSE A

*Gaziantep University Medical School, Gaziantep, Erciyes University Medical School, Kayseri, Turkey*

**Objective:** The aim of this study was to evaluate the metabolic and emotional responses of intern doctors to stress in the ED (Emergency Department). We also studied the relationship between the metabolic response and the emotional state of people included in the study. **Methods:** 37 intern doctors who came to the ED for training were enrolled in this study. Two groups were studied. The study group (SG) consisted of 22 interns, and the control group (CG) consisted of 15 people. Anxiety scores of the groups and blood levels of some stress hormones and blood glucose levels were analyzed. **Results:** Anxiety score and blood levels (e.g. glucose and cortisol) of SG were found higher than CG. Insulin levels of the SG were found lower than CG ( $p < 0.05$ ). Prolactin levels of the SG were found higher than CG which was not statistically significant ( $p > 0.05$ ). Positive correlations were found between the anxiety scores and cortisol levels ( $r = 0.430$   $p < 0.01$ ), and negative correlation was found between the anxiety scores and insulin levels ( $r = -0.402$   $p < 0.05$ ). **Conclusions:** This study proves that intern doctors working in the ED experience anxiety, and exhibit some metabolic responses. In addition, there is a good correlation between anxiety scores and the metabolic responses.

### INCIDENCE OF TRAUMA AFTER THE SEPTEMBER ELEVENTH TERRORIST ATTACKS

MILLER SA, SLOAN EP

*University of Illinois at Chicago Medical Center*

**Objectives:** This study was undertaken to determine if there was a change in the incidence of trauma presenting to major trauma centers for the seven-day period following September 11, 2001. **Methods:** Data from the seven-day period following September 11 (week four) was compared to the same seven-day period the week prior (week three), as well as the two corresponding seven-day periods in 2000 (weeks one and two). A retrospective analysis was performed on data from the Illinois Department of Public Health trauma registry. The registry includes data from all the Level I and II trauma centers in the state of Illinois. Data were analyzed for intentionality using etiology codes. **Results:** A total of 3,474 cases were analyzed. There was no significant difference in amount of trauma patients between weeks one and two, and an increase in week three of 9% compared to the first two weeks ( $p = 0.002$ ). In week four, the week following September 11, there was an 11% decrease from the first two weeks ( $p = 0.003$ ) and a 16% drop from week three ( $p = 0.001$ ). There was no significant difference in intentional trauma between the four weeks, and the difference in unintentional trauma mirrored the overall statistics. In Chicago, there was a decline of 18% compared to the first three weeks ( $p = 0.011$ ). The average daily temperature and average daily precipitation from these

time periods are also provided. **Conclusion:** This data shows that there was a dramatic decrease in the incidence of overall trauma after the disastrous events of September 11, 2001, with most of the decrease occurring in the unintentional category. This suggests the average population was putting themselves at less risk than before. Surprisingly, the incidence of intentional trauma did not significantly decrease. This decline in overall trauma may have an impact in resource utilization in areas distant from any future catastrophic event.

### EMERGENCY DEPARTMENTS PROVINCE COORDINATION COMMISSION IN IZMIR TURKEY

ERYILMAZ M, SOFUOĞLU T, ATÝLLA R, TARGAN E

*Ýzmýr Acýl Servýsler Arasi Koordýnasyon Komýsyonu Ýzmýr*

It is the goal for all the Emergency Departments (ED's) in Ýzmir/Turkey to function at a similarly, high level of international standards. Top-quality services that will enhance the ability to attain this goal include forming a transport chain between the hospitals and emergency services, and maintaining a well-trained, and motivated staff. To achieve these goals, 'Emergency Departments Province Coordination Commission (EDPCC)' was organized in Ýzmir, Turkey on 22, November 2002. The commission gathers at a meeting every month in a different ED. The functions of the commission are to: 1. Coordinate EDs nationwide, 2. Determine the patient transport criteria among the hospitals' ED, working to establish the chain, 3. Support the operations between the EDs to strengthen the communication background, 4. Determine the standardization of the concepts of personnel, equipment, physical conditions and working principals in respect of the capacity of the EDs, 5. Plan the training of the working personnel, 6. Make proposals on personnel working order and medical procedures, 7. Participate in the development and coordination between 112 Emergency Call Center and Hospitals' EDs, 8. Plan the training of EDs to prepare them for disasters and also to determine the hospital disaster projects, 9. Supply the evaluation of statistical data and provide the results of the analysis, and 10. Make proposals to higher positions to increase the quality and the quantity of EDs.

### EVALUATION OF ROMANIAN HOSPITALS AS POTENTIAL TRAUMA CENTERS

ARAFAT R, BOHAN S, VANGHELIE B

*Mures County University Emergency Hospital, Emergency Department, Romania, Brigham and Women's Hospital, Emergency Department, Massachusetts*

**Background:** Trauma in Romania is a growing problem. Not only the number of cases but also the diversity and level of seriousness is increasing. **Objectives:** To evaluate regional and county hospitals and other smaller hospitals as potential trauma centers and to classify them in different levels based on their human resources, equipment and organization. **Methods:** A questionnaire was designed to collect information on personnel, equipment and organization of shifts. We used an adapted U.S. classification system in order to classify the hospitals that answered the questionnaire into level I, II, III or IV trauma centers. A number of hospitals answered the questionnaire by mail while most of them answered on a direct