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## Oral Presentation

### Trauma Surgery and Injury Prevention

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#### **Abstract**

In our country injury and its related sequelae are major public health problems. Organizations that are responsible for dealing with these issues must be familiar with the impact of it on national health status and resources to have prioritized their control strategies and also target trauma centers. Injury is the 5<sup>th</sup> cause of death in the whole population and the 1<sup>st</sup> in the age first decades of life (1-44 years). Unfortunately disabilities are far exceeding and the affected persons are young working populations of community, these make the health burden expenses more pronounced. In our country we have both accidents and injuries as the main public health problems nowadays encountering with, so here the definitions of each need to be clarify for better control planning.

Accident: An unexpected occurrence, happening by chance.

Injury: A definable, correctable event, with specific risks for occurrence.

Categorizing of injury prevention is very helpful for the persons who are involved in planning and leading the control program:

Primary prevention: Eliminate the event.

Secondary prevention: Diminish effect.

Tertiary prevention: Improve outcomes.

Incidence of injury can decrease if we can control or modify the risk factors and also manage the sequels in a timely manner, most of time this can be achieved by trauma surgeons with focus on management of the injured patients only. They have an important role in management of the victims, but their main responsibility is to give their feedback to the organizations that are in charge. Trauma surgery centers have an enormous role in injury prevention programs; they can identify the problems, collect and analyze data's, design interventions, select and participate in action plans and also perform effective evaluations and give feedbacks. Unfortunately there is a weak collaboration between the public health planners and trauma centers, making execution and pervasiveness of the control plans difficult.

**Keywords:** Trauma surgery, Injury, Public health.

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