ثَقَ مَقَ مَنْ

The 6th International Road Safety and 3rd International Neurotrauma Congress

Shefa Neuroscience Research Center, Tehran, Iran, 15-16 February, 2017

The Neuroscience Journal of Shefaye Khatam

Volume 4, No. 4, Suppl 2

Oral Presentation

Elderly People in Road Traffic Accidents

Wolfgang Böcker*

Department of General, Trauma- and Reconstructive Medicine, Munich, Germany

Published: 15 February, 2017

Abstract

Due to demographic changes in Germany older people are more frequently injured in road traffic accidents. In 2015, 73.338 older people were involved in traffic accidents with fatalities and/or injuries. The numbers of older people who have been injured in traffic accidents have increased dramatically since the late 90's (+40%). But in general, elderly are less likely to be involved in road accidents due to less participation in traffic. The group of elderly people is very inhomogeneous. The cognitive ability and capacity as well as their state of health varies widely. Therefore, many European Countries have introduced health checks in elderly people. Although the risk of sustaining injuries is half compared to the average population, the relative risk to sustaining severe injuries is much higher. 25,5% of the elderly were severely injured in traffic accident, while this was significant less in people <65 years (15,9 %). Furthermore, elderly people are less likely to survive traffic accidents. Mortality is three time higher in people > 65 years of age. This is due to less physical resistance and the way elderly participate in traffic: elderly people are less likely to use motor vehicles and get more often injured as unprotected pedestrians. In general, the chance to die in traffic accidents has decreased in elderly people since 1980 by 77,1%, although elderly people are more likely to loose overview in complex traffic situations. Elderly patients suffering a high-energy trauma with multiple injuries are often undertriaged to trauma centers and underresusitated. Aggressive and early resuscitation can improve outcome in elderly patients. Comanagement by orthopaedic surgeons and geriatricians in these patients can lead to lower length of hospital stay, lower complication rates and mortality.

Keywords: Elderly people, Traffic, Trauma

*Corresponding Author: Wolfgang Böcker

E-mail: wolfgang.boecker@med.uni-muenchen.de

