

Cost of road trauma falls

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The cost of major trauma from road traffic injury and death has fallen over the last decade with the introduction of an integrated trauma system in Victoria, a new study has shown.

A Monash University analysis of the Victorian State Trauma Registry (VSTR) found the number of [road traffic](#) related deaths has declined over the past decade. People injured in road traffic crashes were more likely to survive their injuries, significantly reducing the overall cost from loss of health. It is the first time the impact of [trauma](#) care systems

on the cost of road traffic injury has been evaluated.

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Led by Professor Belinda Gabbe, Head of the Prehospital, Emergency and Trauma Research Unit in the Department of Epidemiology and Preventive Medicine, the results of the comprehensive analysis conducted by local and international trauma experts was published this week in the *Annals of Surgery*.

The study found more road transport victims were being taken directly to a major trauma service for treatment, with a reduction in the proportion of cases requiring admission to ICU and fewer severe head injuries from road transport accidents.

During the period of July 2001 to June 2011, years of life lost decreased by 43 per cent, and years lived with disability increased by 32 per cent, with an overall 28 per cent reduction in the number of years of healthy life lost due to disability from injury.

Professor Gabbe said the findings demonstrated the value of trauma systems as an important component of the public health approach to injury prevention.

"Road traffic injury is a leading cause of death and disability, claiming the lives of 1.3 million people each year around the world. In Australia alone, road trauma accounts for more than 1000 deaths annually," Professor Gabbe said.

"The cost of trauma care for survivors and the burden to society can be seen in terms of pain and lost quality of life, loss of wages and

permanent or long-term disability. Although the number of hospitalised transport-related major trauma cases has increased over time, disability burden has declined, decreasing the population burden of road [traffic injury](#).

"This research demonstrates that a combination of improvements to [trauma care](#) in Victoria, widespread public health campaigns, and Australian legislation has played a significant role in reducing this burden over the period."

Funded by the Victorian Department of Health and Transport Accident Commission, the VSTR monitors and evaluates the care of seriously injured patients in Victoria.

Assistant Treasurer Gordon Rich-Phillips said the findings were encouraging, however the Transport Accident Commission (TAC) received thousands of injury claims every year that may not involve a person being treated in a trauma ward.

"The TAC receives about 17,000 new injury claims each year, of which only 35 per cent involve a hospital stay and of these approximately 20 per cent spend time in the trauma ward," Mr Rich-Phillips said.

"Many of these people require lifetime care from the TAC, and continue to be supported during recovery or assisted to live as independently as possible with their injuries.

"The State Coalition Government and the TAC will be continuing its focus on reducing serious injuries on our roads this year which is outlined in our 10-year strategy Safe roads for all Victorians," Mr Rich-Phillips said.

More information: "Reduced Population Burden of Road Transport-

Related Major Trauma After Introduction of an Inclusive Trauma System." Gabbe, Belinda J. PhD, MBIostat, MAppSc; Lyons, Ronan A. MB, MPH, MD, FFPHMI, FFPH; Fitzgerald, Mark C. MBBS, FACEM, MRACMA; Judson, Rodney MBBS, FRACS, FRCS, FACS; Richardson, Jeffrey PhD; Cameron, Peter A. MBBS, MD, FACEM *Annals of Surgery*: 14 January 2014. [DOI: 10.1097/SLA.0000000000000522](https://doi.org/10.1097/SLA.0000000000000522)

Provided by Monash University

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