

Mater Adult's Hospital Mater Children's Hospital Mater Priority Emergency Centre Redlands Hospital Logan Community Hospital Queen Elizabeth II Jubilee Hospital Princess Alexandra Hospital

This Month...

We summarise the first meeting of Queensland's Injury Coalition held on the 12th April at the Mater Hospital.

OCCUPATIONAL INJURIES: Examines eye injuries in the laboratory.

DID YOU KNOW: Discusses injuries caused by cigarettes.

SEASON WATCH: Focuses attention on the topical issue of injuries from football including head and spinal injuries and injuries from goal posts.

Other items of interest include bones lodged in throats and stroller and pram injuries.

QISPP HOSTS DEVELOPMENT OF INJURY COALITION

Twenty three representatives from a wide variety of organizations interested in injury control met at the Mater Hospital on April 12 at the first meeting of Queensland's Injury Coalition.

Organizations represented were St. John Ambulance, University of Queensland Department of Child Health, Faculty of Engineering and Applied Sciences at Griffith University, the Sports Medicine Foundation, Emergency Departments of the Princess Alexandra, Mater Adult, Mater Children's and Royal Children's Hospitals, Office of Consumer Affairs, Division of Workplace Health and Safety, Royal Lifesaving Society, Darling Downs Regional Health Authority's Population Health Unit, Queensland Transport, Brisbane City Council, Queensland Health, West Moreton Regional Health Authority, the Department of Paediatric Surgery, University of Queensland and QISPP.

Members of the group agreed unreservedly that the collaboration of many disciplines was necessary for success in injury control.

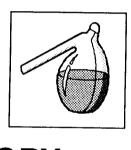
Bulletin No.24 MAY 1994 Page 1

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The Coalition will meet every two months and it was proposed that the program include a short presentation, around-the-table introductions and discussion, and time for informal networking. Communication would be via QISPP's Injury Bulletin and the circulation of meeting minutes to members. A directory of names, addresses and contact numbers will also be collated and distributed to members.

The next meeting of the Injury Coalition will be held at 2 pm on Tuesday June 28 in Conference Room 4, Level 3, Mater Adult Hospital. Mike Knowles from the Australian Sports Medicine Foundation will speak on sporting injuries. The meeting is expected to run for approximately two hours.

EYE **INJURIES** IN THE **LABORATORY**



In a six year period from 1/1/88 to 31/12/93, QISPP recorded 29 cases of eye injuries occurring in laboratory workers. Of these, five were in hospital laboratories, two in educational institutions and the remainder in other private or government industries.

Seventeen of the injuries occurred when chemicals (eg acids) or biological products (eg blood) splashed into the eye. In seven cases, parts of the equipment broke and fragments (including four cases of glass) entered the eyes. In three cases the eyes were injured by released gases and one case the eyes were exposed to U.V. light.

Twenty one of the injuries required follow-up treatment, although none was serious enough to require admission to hospital.

Safety glasses were reportedly worn in only one case.

DID YOU KNOW? DI

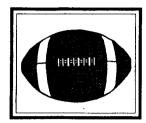
Bulletin No.24 **MAY 1994**

Page 2

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SEASON WATCH

INJURIES FROM FOOTBALL



The football season is here again and we remind readers of the risks, especially to young players. We review injuries from Australian Rules football, touch football and rugby recorded on the QISPP database over the past six years. Our data classification does not allow differentiation between codes, and for all four codes the activity being undertaken is classified as 'football'.

The hospital emergency departments in the Brisbane South Region have treated 9,825 footballers injured in organised matches during the past six years. This figure represents six percent of all injuries on the database during this period.

More than three quarters (79%) of injured players were aged between 10 and 24 years, with the 15 to 19 year olds being the most commonly affected age group.

One in nine injuries occurred in schools.

The injuries treated included sprains and strains (33%), fractures (25%) and cuts, lacerations and abrasions (10%). Seventeen percent of all fractures (4% of all injuries) were fractured clavicles. Other common fractures included hands and fingers (30%) and radius and ulna (12% of all fractures).

In 45% of cases the injured persons' injuries resulted from contact with another person. In 29% of cases the injury resulted from contact with the ground. The remainder of injuries resulted from a miscellany of items on and adjacent to the playing field.

The football season is a time of excitement, entertainment and recreation for many, as participants or as spectators. Parents, players, administrators and coaches should recognise and assess the risks with a view to reducing those that have long term consequences for young players.

SPECIAL REPORT: HEAD AND SPINAL CORD INJURIES

In this same data set of 9,825 footballers, eighteen percent of injuries to players were to the external head, face and neck. These included a range of injuries from superficial cuts to eye injuries (135 cases), fractured skulls (133 cases) and fractured necks (9 cases). 237 players suffered fractured noses.

In addition to these external head and neck injuries, 635 players (6%, or 1 in 17) sustained intracranial injuries (injury to the brain, concussion) or spinal cord injuries. Thirty-five percent of these players required admission to hospital.

A smaller number of footballers (15 cases) suffered other major injuries included bleeding of the liver and spleen, punctured lung and injury to the chest.

INJURIES FROM GOAL POSTS AND FIELD MARKERS

QISPP recorded 98 injuries due to contact with goal posts and field marking posts during football, soccer and rugby over a six year period ending in Marchthis year. This group represented 0.9% of all football and soccer injuries on the QISPP database. The overall admission rate of this small group was 11% (the QISPP average admission rate is 12% for all injuries).

Forty percent of players injured in this way were in the 10-14 years age group.

Twenty one percent of cases sustained bruising, lacerations or abrasions to the head or face (although none of these cases required admission to hospital), and 10% of players suffered concussion (4 required admission).

Eighteen percent of players injured their fingers and hands, although only one player was admitted with injuries of this nature.

In 9% of cases the post fell on the player.

The majority (62%) of these injuries occurred at sports arenas or ovals. The injuries occurring at these locations had an admission rate of 7%. A further 35% of injuries occurred in school grounds, with 20% of these injuries requiring admission.

Forty-two percent of those injured were playing soccer.

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BONES LODGED IN THROATS

Over a five year period to the end of December 1993, QISPP recorded 607 people presenting to hospital with bones lodged in their throats. According to the data 7% of these incidents were potentially catastrophic as the bone was inhaled in the respiratory tract. The majority were caught in or punctured the mouth or oesophagus.

Of the 607 presentations, 20% required admission to hospital with five percent of these cases requiring transfer to a larger centre.

The most frequent injuries were in children under 10 years and adults in the 40-49 year age group, with females showing a higher incidence than males.

One-fifth of cases required further treatment after their initial presentation. Three percent of people were on the job at the time, and one quarter of these intended to claim workers compensation for their injury.

Two-thirds of cases reported eating fish and 18% reported eating chicken at the time of their injury.



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STROLLER AND PRAM INJURIES IN CHILDREN

QISPP recorded 158 injuries to children under five years involving prams and strollers during a six year period ending 31.12.93. Sixteen percent of these required admission to hospital. Over 80% of injuries occurred in children under two years with a further 15% occurring in two year old children.

Almost half the injuries occurred at home with a further 20% occurring in areas of private enterprise (e.g. shops, cinemas, pubs) and 20% occurring in transport areas such as footpaths and roads.

Two-thirds of the injuries were a result of falls from the pram or stroller. Thirty percent of these children sustained concussion and 25% suffered cuts or lacerations to the face and head. Ten percent of children sustained fractures, with fractured skulls accounting for half the fractures recorded.

Of the falls from prams and strollers, 33 cases involved the tipping of the pram as a contributing factor and 13 cases involved stairs.

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