

Trauma Resuscitation and Damage Control

With an increase in the population as in the automotive industry with faster, lighter cars and the growing social violence, it has led us to a new panorama for education and attention focused on trauma resuscitation and damage control.

In the last 10 years, it has been seen worldwide that motor vehicle accidents, high energy trauma injuries are among the top 10 causes of morbidity and mortality worldwide.

What gives us the guideline to seek a more effective multidisciplinary medical care, in terms of resuscitation management and damage control of the different traumatic conditions that there is every day; they enter the emergency departments, which require an adequate systematization of human and material resources that involve emergency physicians, trauma surgeons, cardiothoracic surgeons, neurosurgeons, traumatologists, intensivists, anesthesiologists, etc.

Without forgetting the importance of detection, adequate protocols for care and transfer by paramedical personnel, who are the ones who often give the first care to trauma patients.

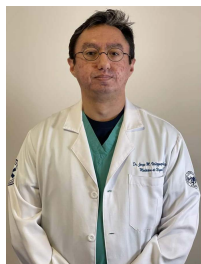
Therefore, the investigation and the adequate systematization in the attention, will lead us together to optimize the times, the management of crystalloid solutions and blood components, the adequate use of complementary studies to later give a management that limits the damages and the repercussions long-term that are inherent to severe trauma to the skull and brain, thorax, abdomen and extremities.

Without forgetting the psychological consequences that this type of accidents and injuries leave in patients, so their follow-up is just as essential.

This special edition is aimed at collecting manuscripts, which provide us with new evidence of the initial management of trauma patients, both in the ER, surgery and intensive care units.

Either by reviews of the state of the art in resuscitation and damage control, original articles, clinical cases, etc., because all this still represents a diagnostic and therapeutic challenge, where there is anything but simplicity; In addition, a multidisciplinary care perspective is required to reduce the morbidity and mortality of high-energy trauma, and thus optimize care in emergency departments, operating rooms, and intensive care.

Keywords: Trauma, Resuscitation, Damage control, Emergency care, Critical care, Trauma surgeon, Blunt trauma, Penetrating trauma.

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