

## **Strengthening the Care of the Injured Globally: "The Essential Trauma Care Project"**

*Charles Mock, MD, PhD, MPH\**

Injury has become a major cause of death and disability worldwide. Organized approaches to its prevention and treatment are needed. In terms of treatment, there are many low cost improvements that could be made to strengthen the care of injured persons. The goals of the Essential Trauma Care Project are to promote such low cost improvements.

The ETC Project is a joint endeavor of the World Health Organization (WHO) and the International Association for the Surgery of Trauma and Surgical Intensive Care (IATSIC), an integrated society within the International Society of Surgery / Societe Internationale de Chirurgie. It seeks to build on two foundations:

1. The experiences of developed countries in trauma system development.
2. The experiences of developing countries and international health groups (such as the WHO) in addressing other health problems through promotion of essential health services. These are services that are low-cost, high-yield, and which could realistically be made available to almost everyone in a given population. Examples include the Expanded Program on Immunizations, the Global TB Program, and the Safe Motherhood Initiative. Thus far a similar approach has not been applied to trauma, and it is time to do so.

The ETC Project seeks to better define what trauma treatment services should realistically be made available to almost every injured person in every country. The Project seeks to develop ways to assure the availability of these services by strengthening the inputs of: (i) human resources (training and staffing); (ii) physical resources (supplies and equipment); and (iii) administration.

The WHO and IATSIC's Working Group for Essential Trauma Care have worked together on this for two years. This includes a meeting held at the WHO in Geneva in June in which trauma surgeons from 7 developing countries, including representatives of IATSIC, met with the WHO. A preliminary version of a document, entitled *Guidelines for the Development of Essential Trauma Care Services*, was developed. We anticipate a final version of this within the next 6 months. This document is intended to serve as a guide to assist ministries of health in developing plans to improve trauma services within individual countries.

The *Guidelines for ETC* are meant to help with planning for trauma care services and also to serve as a catalyst to promote low cost but effective improvements in such services. As such, their true utility lies in what they can accomplish on the ground in individual countries. The organizers of the ETC Project envision this to be a collaborative process, involving ministries of health, country offices of the WHO, professional bodies (such as trauma or surgical societies) and interested groups of lay people. Already some progress has been made in this regard. The Guidelines for ETC have served as a basis for needs assessments of trauma care in Vietnam, Ghana, and Mexico. They have also served as a basis for the beginnings of a trauma system, currently being planned in the state of Gujarat, India. This has involved the state government of Gujarat, the Gujarat office of the WHO, the Indian Academy of Traumatology and several other professional groups. We are hopeful that efforts in these countries are only the beginning and that the ETC Project will serve as a stimulus and guide for trauma care improvements globally. We invite the participation of all who are interested in this.

*\* Charles Mock, MD. PhD, MPH*

*Trauma surgeon and epidemiologist at the University of Washington, School of Medicine (Department of Surgery) and the School of Public Health (Department of Epidemiology), Principal Investigator of the CIREN (Crash Injury Research and Engineering Network) team, Seattle, WA, USA*