A comparison of children with injuries to the head and injuries to the body

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To the Editor: Head injuries are the most common cause of injury-related mortality and morbidity.1,2 Of the almost 90 000 childhood injuries (i.e. occurring in children less than 13 years of age) treated at the Red Cross War Memorial Children’s Hospital Trauma Unit from January 1991 to December 2001, more than one-third involved the head region.

A comparison of children with head and other injuries showed no gender difference. Older children (over 2 years) were significantly less likely to suffer injuries to the head than children aged 2 years or less. Injuries to the head were significantly more likely in transport-related situations than when there were other causes such as assaults and falls. Within the transport-related injury group, head injuries were significantly more common in children injured as passengers than among children injured as pedestrians. Children with injuries to the head were 2.88 times (95% CI: 2.35 - 3.52) more likely to be admitted to an intensive care unit and 2.1 times (95% CI: 1.51 - 3.25) more likely to die than children with other injuries.

In order to prevent head injuries in children there is a need to identify causes, especially with regard to motor-vehicle crashes, and to implement strategies to reduce their occurrence. Although many head injuries are minor, because of the devastating effects of moderate and severe head injuries, they constitute an important public health problem.3 A significant number of head injuries lead to death and serious disability and suffering. There is therefore a need to develop and implement preventive strategies that address this ‘forgotten epidemic’.4


David Hepburn Study Award, 2005

The KwaZulu-Natal Kidney Association invites applications for the above award from suitably qualified medical, nursing and paramedical personnel registered in South Africa. Applications will be considered by a national committee.

It is intended to sponsor a suitable person for a study or research project in the field of kidney disease. It is desirable that the successful applicant should have been accepted for his or her research or study project by an appropriate research institute, university department or recognised renal institution. If the successful candidate goes overseas, he or she must undertake to return to South Africa for a minimum of 3 years on completion of the project.

Application forms are obtainable from the Secretary, KwaZulu-Natal Kidney Association, PO Box 1332, Durban, 4000, or from the Chairman, A J F Ross (tel. (031) 207-8604, fax (031) 208-3783). Completed forms must be returned to the Association on or before 31 July 2005.