

Pre-Hospital And Inter-Hospital Transfer With Pre-Operative Delay In The Management Of Extradural Haemorrhage

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Purpose

To analyze the pre hospital, inter-hospital delay and the intra hospital delay in the management of EDH in Sri Lanka

Materials and Methods

A descriptive pilot study was carried out in all the consecutive patients with a computerized tomographic (CT) diagnosis of EDH, admitted to Neuro Trauma Unit (NTU) of National Hospital of Sri Lanka over a period of one month from 01/09/2017 to 30/09/2017.

Results

Out of 33 of total admissions with EDH, 84.8% (n=28) was males and 15.2% (n=5) was females. Age range was 77 (minimum= 8, maximum= 85) years. The commonest cause was road traffic accident which was accountable for 57.6 (n= 19). The mean EDH volume was 39.6ml (SD= 39.5ml, range; 2.5ml- 162ml). 57.6 %(n=19) underwent surgical intervention and rest was managed conservatively. The mean time for admission to a primary care centre was 74.65 mins (SD= 94.20, range; 15 mins- 380mins). The mean inter-hospital transfer time was 823.17mins (SD=1138.49, range; 0 mins - 4625 mins) and mean time for the intervention at tertiary center was 459 mins (SD= 730.14, range; 80 mins- 2640mins). The mean total pre-operative delay was 1044.16mins (SD=1115.05, range; 80mins-3585mins).

Conclusion

The pre-operative delay of the patients who are admitted with EDH is quite significant in Sri Lankan setting which warrants efficient pre-hospital and inter-hospital transport system.