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## NTDB™ data points

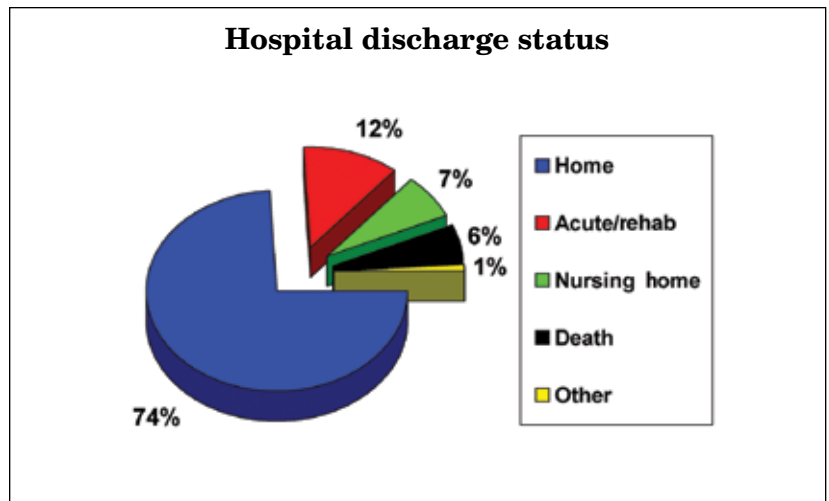
# For whom the bell tolls?

by Richard J. Fantus, MD, FACS, Chicago, IL, and John Fildes, MD, FACS, Las Vegas, NV

After an entire season of football, playoffs, college bowl games, hockey, wrestling, boxing, and the like, do you ever wonder what happens to all the athletes who have their bell rung? Did you wonder why helmet-to-helmet contact in the National Football League is no longer tolerated? Did you know that the force of a professional boxer's fist is equivalent to being hit with a 13-pound bowling ball traveling at 20 miles per hour, or 52 Gs?

Although sports injury fatalities are infrequent, the leading cause of death from sports-related injuries is traumatic brain injury (TBI). TBI is defined as a blow or jolt to the head or a penetrating head injury that disrupts normal brain function.

Symptoms of TBI are categorized as mild, moderate, or severe. Mild TBI may result in a brief change in consciousness whereas a severe injury may result in prolonged unconsciousness, coma, or death. According to the U.S. Consumer Product Safety Commission's National Injury Information Clearinghouse, there were more than 311,000 sports-related head injuries that ended up in U.S. emergency rooms in 2004. This number does not include those injuries that were treated in physician offices or urgent



care centers or that were self-treated.

In order to examine the occurrence of these injuries in the National Trauma Data Bank™ Dataset 5.0, we used cause of injury codes (E codes) E917.0 for striking or struck accidentally by objects or persons in sports without subsequent fall, E917.6 in sports with subsequent fall (for example, boxing), and E886.0 fall in sports (for example, tackles). We then queried those records for any that contained a diagnosis in the head injury range of the *International Classification of Diseases, Ninth Revision (ICD-9-CM)* codes 850–854. There

were 11,655 records, with 8,651 being discharged to home; 1,378 to acute care/rehab; 849 to nursing homes; 132 other; and 645 deaths. These data are depicted in the figure on this page. These patients were, on average, 38 years of age, had an average length of stay of almost five and one-third days, an intensive care unit length of stay of just more than one and one-half days, and an average injury severity score of 10. It is not surprising that there is an older average age of injury since Baby Boomers are taking to the bicycle paths and basketball courts and represent more than one-third of Americans

participating in sports.

Throughout the year, we will be highlighting these data through brief monthly reports in the *Bulletin*. The full NTDB

*Annual Report Version 5.0* is available on the ACS Web site as a PDF file and a PowerPoint presentation at <http://www.ntdb.org>.

If you are interested in submitting your trauma center's data contact Melanie L. Neal, Manager, NTDB, at [mneal@facs.org](mailto:mneal@facs.org).

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