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WORLD MEDICAL ASSOCIATION DECLARATION**on****INJURY CONTROL**

Adopted by the 42nd World Medical Assembly
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The World Medical Association, having studied the issues relating to injuries and injury control at its Scientific Session held in Hong Kong in September, 1989, urges its National Medical Associations to work with all of the appropriate public and private agencies in each country to develop and implement a program to control and prevent injuries. Included in the program must be efforts to improve medical treatment and the rehabilitation of injured patients. Research and education on injury control must be increased, and international cooperation is a vital and necessary component of a successful project.

The World Medical Association encourages its National Medical Associations to incorporate the following basic elements into their programs.

1. INTRODUCTION

Injuries are the leading cause of death and disability in children and young adults. Injuries destroy the health, lives and livelihoods of many millions of people each year. Yet injuries are preventable. Opportunities are available to understand and prevent injuries. Lives can be saved and improved by taking advantage of such opportunities. Injury control should be recognized as a priority public health project requiring coordination among health, transportation and social service agencies in each country. Physician participation and leadership is necessary to assure the success of such a project.

2. EPIDEMIOLOGY

The initial effort of such a project, must be the acquisition of more adequate data on which to base priorities, interventions and research. An effective injury surveillance system should be implemented in each country to gather and integrate information. A consistent and accurate system for coding injuries must be implemented by hospitals and health agencies. There should also be uniform coding of injury severity.

3. PREVENTION

Injury prevention requires education and training to teach and persuade people to alter their behavior and thereby control their risk of injury. Laws and regulations should be enacted requiring changes in behavior based on scientifically sound methods of preventing injuries. These laws must be strictly enforced in order to effectively influence behavior changes. Improvements in product and environmental design of various products to provide automatic protection against injuries must be encouraged, as they will be the most effective means of preventing injuries.

4. BIOMECHANICS

Biomedical research on injury causation and prevention should be given priority. A better understanding of the biomechanics of injury and disability could enable the development of improved protection for humans. Regulations pertaining to product design must incorporate product safety standards developed from an improved understanding of the biomechanics of injury.

5. TREATMENT

Injury management at the scene of the occurrence must be enhanced by an effective system of communication with medical practitioners, to facilitate decision-making. Rapid and safe transportation to the hospital must be provided. An experienced team of trauma practitioners must be available at the hospital. There must also be adequate equipment and supplies available for the care of the injured patient, including immediate access to a blood bank. Education and training of medical practitioners in trauma care must be encouraged to assure optimal technique by an adequate number of physicians at all times.

6. REHABILITATION

Trauma victims need a continuity of care emphasizing not only survival but also the identification and preservation of residual functions. Rehabilitation to restore biologic, psychologic and social functions must be undertaken in an effort to allow the injured person to achieve maximal personal autonomy and an independent lifestyle. Every effort must be made to help the patient (and family) avoid institutionalization. Rehabilitation may also require changes in the patient's physical and social environment.

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