

INTRODUCTION

Presented in this issue are the abstracts from TraumaCare 2004, held in Sydney, Australia, October 15–17, 2004. This was a joint meeting of the Australasian Trauma Society and International TraumaCare (ITACCS), attended by 500 delegates from 37 countries. An international faculty of 97 presented the latest topics related to an interdisciplinary approach to the management of trauma. Abstracts from the

plenary sessions, oral presentations, and poster presentations are published here. The Winter 2005 issue of *TraumaCare* contains a message from the outgoing President of International TraumaCare, Dr. Michael J.A. Parr, as well as six articles based on presentations at the 2004 symposium on the topics of blood use, hypothermia, and brain injury.

PLENARY ADDRESSES—ABSTRACTS*

“It’s All Ancient History” – Ancient Egyptian, Greek, and Roman Trauma Care

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**In Egypt, the men are more skilled
in Medicine than any of human kind.**

—Homer

The effect of the examination on his immediate course of action toward the patient was the most important thing for the ancient surgeon. According to the ancient Egyptian physicians, the clinical examination was “the beginning of the secrets of the physician.”

The Edwin Smith Papyrus is the earliest known surgical treatise. It dates back to 1600 BC. The treatise consists of 48 cases, most of which are traumatic injuries, with “recipes” for treatment.

The text of the Edwin Smith Papyrus consists of the following sections (not all cases contain all sections):

Title: “Instructions concerning...”
Examination: “If thou examinest a man having...”
Diagnosis: “Thou shouldst say regarding him
‘One having a...’
“An ailment which I will treat.”
“An ailment which I will contend.”
“An ailment not to be treated.”*

*In only 3 of the 48 cases was the verdict hopeless in the Edwin Smith Papyrus.

The first recorded procedure for reduction of a dislocation of the mandible was described as Case 25 in the Edwin Smith Papyrus:



“Instructions concerning a dislocation in his mandible.”

In the examination section, the procedure is described as follows: “If thou examinest a man having a dislocation of his mandible, shouldst thou find his mouth open (and) his mouth cannot close for him, thou shouldst put thy thumbs(s) upon the ends of the

two rami of the mandible in the inside of his mouth, [and] thy two claws [meaning two groups of fingers] under the chin, [and] thou shouldst cause them to fall back so that they rest in their places.” To this day, mandible reduction is performed in like manner!

One of the first known wound care products was beer. An ancient Mesopotamian prescription for healing a person “sick with a blow to the cheek” was to “pound together fur-turpentine, pine-turpentine, tamarisk, daisy, flour of Inninnu. Strain; mix in milk and beer in a small copper pan, spread on skin, bind on him, and he shall recover.”

Some of the “firsts” in trauma management attributed to the Greeks were the use of wine and vinegar to treat wounds. The Greeks may have been the first to recognize the danger of gangrene associated with the use of tourniquets. Placing cold water around the wound to stop bleeding was also recommended by the Greek physicians. The Greek “drug” for fresh wounds was extracts from various plants, oils, resins (myrrh and frankincense), and inorganic salts.

Is modern trauma care actually “ancient” trauma care revisited? Something to think about!

References

1. Breasted JH, ed. *The Edwin Smith Surgical Papyrus*, Hieroglyphic Translation, Transliteration & Commentary. Oriental Institute Publications III-IV, 1911.
2. Cohen IK. Foreword. *A Brief History of Wound Healing*. Ortho-McNeil Pharmaceutical and Janssen-Cilag, Oxford Clinical Communications, Inc., 1998.

Two Centuries of Advances in Trauma Care

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Learning Objective: To comprehend the contributions made to trauma care by discoveries made between the latter part of the 18th century and the latter part of the 20th century.

History: The basic principles of respiration and the circulation had been partly unravelled by Robert Hooke, John Mayou, and, of course, William Harvey earlier in the 1600s. But it was during the latter part of the 18th century that the fundamentals of trauma care,

*Names of presenters are underlined.