

TRAUMACARE 2003

16th ITACCS Annual Meeting Held in Dallas

The 16th Annual Trauma Anesthesia Critical Care Symposium (ATACCS) was held on May 15–17, 2003, in Dallas, Texas, USA. The meeting was attended by trauma care specialists from Canada, Denmark, Ecuador, France, Germany, Japan, India, Israel, New South Wales, Norway, Sweden, Switzerland, Taiwan, Trinidad, the United Kingdom, and throughout the United States.

The scientific program was organized by James G. Cain, MD, and Christopher M. Grande, MD, MPH. The opening plenary session began with a welcome from conference organizers and featured an insightful lecture titled "JFK in Dallas: A Trauma Care Perspective," by Adolph H. "Buddy" Giesecke, MD, who was a member of the resuscitation team at Parkland Hospital in Dallas on the day President John F. Kennedy was shot. His presentation offered first-person observations and historical facts from someone very close to the scene.

Dr. Giesecke was honored with a Lifetime Achievement Award, presented by ITACCS President Michael J. A. Parr, MRCP, FRCA, FANZCA, FJFICM. After serving as the second president of ITACCS and then as co-editor of *TraumaCare* for the past 5 years, Dr. Giesecke has decided to retire from active roles in the organization (see article on page 77).

The ambitious 3-day conference schedule comprised 12 four-hour didactic and hands-on training sessions. Topics included disaster medicine, critical care in the age of terrorism, trauma education (simulation), organ donation and end-of-life issues, and pediatric trauma. The popular hands-on trauma airway management workshop was made possible by equipment loans from a number of manufacturers.

Entrants in the annual ITACCS Scientific Research Award competition presented their work during the symposium. The winners were acknowledged with certificates and monetary awards to support their continued studies.

The 17th ATACCS will be held in Sydney, Australia, on October 15–17, 2004, as a joint meeting of TraumaCare International (ITACCS) and the Australasian Trauma Society. Information is available on the Web at www.traumacare2004.com.

2003 ITACCS Research Awards Recipients

FIRST PLACE — US\$2000

Clinically Relevant Hyperventilation of First Aid Providers Results from Artificial Ventilation
B. Kleine-Weischede, T. Piepho, MD, C. Jaenig, B.B. Wolcke, MD, A.R. Thierbach, MD
Clinic of Anesthesiology, Johannes Gutenberg-University, Mainz, Germany

SECOND PLACE — US\$1250

Stand-By Intra-Aortic Balloon Occlusion in the Prevention of Cardiac Arrest Prior to Definitive Treatment of Traumatic Hemorrhage
Kitoji Takubiro, MD, Hisashi Matsumoto, MD, Toru Mochizuki, MD, Yuji Kamikawa, MD, Yuichiro Sakamoto, MD, Yoshiaki Hara, MD, Kunibiro Mashiko, MD, and Yasubiro Yamamoto, MD
Nippon Medical School Chiba Hokuso Hospital Department of Emergency and Critical Care Medicine, Chiba, Japan

THIRD PLACE — US\$750

Regional Nerve Block Anesthesia for Landmines: The Right Answer
Major (Dr.) Manish Mehrotra
Indian Army Base Hospital, Delhi Cantt, New Delhi, India

IN-TRAINING RESEARCH AWARD - US\$750

Cervical Spine Management in Unconscious Adult Trauma Patients: Survey of Practice in UK Specialist Centres
Dr. Phil Jones, Mr. John Wadley, Dr. Marie Healy
Royal London Hospital, London, United Kingdom



Dr. Andreas Thierbach (Mainz, Germany), recipient of the first-place research award, presents the results of a study of hyperventilation associated with artificial ventilation.



Dr. Kitoji Takubiro (Chiba, Japan) receives the second-place research award from Dr. John K. Stene. Dr. Takubiro and colleagues investigated the use of intra-aortic balloon occlusion to prevent cardiac arrest prior to treatment of traumatic hemorrhage.



Dr. John K. Stene presents the third-place research award to Major Manish Mehrotra for his presentation on the use of regional nerve block anesthesia in victims of landmine explosions. Dr. Mehrotra is stationed at a military hospital in northern India.



Dr. Phil Jones receives the in-training research award from Dr. John Stene. Dr. Jones and his colleagues at Royal London Hospital surveyed neurosurgical centers in the United Kingdom to determine methods of cervical spine management in unconscious trauma patients.