

CIVILIAN BYSTANDERS AS IMMEDIATE RESPONDERS TO LIFE-THREATENING HEMORRHAGE IN TRAUMA

Introduction and dissemination of a teaching program in the Netherlands

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Introduction

Due to terrorist attacks, Europe has been confronted with civilian victims sustaining military-type of injuries with life-threatening hemorrhage. Direct control of external bleeding is the most important life-saving measurement during the prehospital phase. The military principles of early hemorrhage control have been translated to professional civilian prehospital care. However, to save more lives, bystanders at the scene should act as immediate responders to stop life-threatening external hemorrhage and prevent exsanguination before ambulances arrive.

Trained individuals	2017	2018	Totals
Instructor (VUmc) As per Jan 1st, 2019	387	360	747
Basic (VUmc) As per Jan 1st, 2019	434	307 + 646 (NSTB-D)	1387
Basic (trained outside VUmc by VUmc trained instructors) As per Dec 28th 2018	923	3711	4634
Instructor (outside VUmc) As per Dec 28th 2018	-	29	29
			6797

NSTB-D: sponsored event: National Stop The Bleed- Day, March 31st 2018

The initiative *Stop de bloeding - red een leven* provides for a practical and informative website². Five other Trauma Area Networks have started to give instructor-courses. Purchase of *Bleeding control*-kits as well as wound-packing models and tourniquets for practice is facilitated.

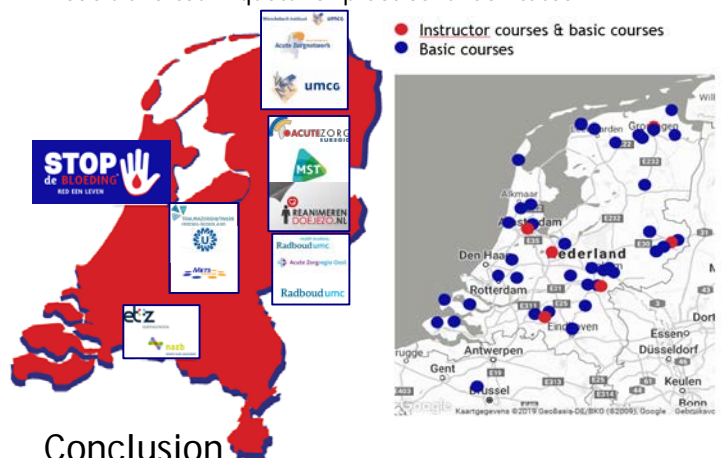


Methods

After their training in the USA, surgeons from VUmc, Amsterdam introduced the non-profit *Stop the bleed- save a life* initiative and training course for civilians in the Netherlands with permission of the American College of Surgeons and Hartford Consensus¹. The course includes the immediate identification of life-threatening hemorrhage and bleeding control through 1) direct pressure, 2) tourniquet application and 3) wound-packing with hemostatic gauzes. Proctored practical skills form the core of the course. Parallel, an instructor-course (with one hour extra of didactics) was initiated to disseminate the course. By affiliation of other Trauma/Acute Care Area Networks a national set-up of instructor courses was effectuated.

Results

Within 2 years, 6797 immediate responders (citizens, first-aid instructors, company first-aid instructors) present at public places were trained. Among this group, 776 followed the instructor-course. Instructors have free access to the educational material in order to facilitate dissemination of the course.



Conclusion

Ideally, the training program should be positioned within the curriculum of all medical and nursing students, first aid-training, company first aid training and first-aid training of police-officers and firefighters. Successful dissemination is effectuated through consortia of trauma surgeons, educationalists and officials of other Trauma/Acute Care Networks. Trauma surgeons may take the lead to train civilians as immediate responders to life-threatening hemorrhage in trauma.

- www.bleedingcontrol.org,
 - www.stopdebloedingredeeenleven.nl
- Contact: l.geeraedts@amsterdamumc.nl