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## Journal of the Medical Association of Thailand, Vol 96, No 2

[Home](#) > [Vol 96, No 2](#) > [Kritayakirana](#)

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### Cardiac Trauma: Has Survival Improved? A University Hospital Experience in Bangkok, Thailand

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#### Abstract

**Background:** Cardiac trauma, if not recognized and properly treated, will lead to a fatal outcome. For the past 16 years, the authors' policy for diagnosing and treating cardiac trauma has not changed but the survival rate in our institute has improved when compared between the two cohorts.

**Objective:** Study the factors for survival in patients with cardiac trauma.

**Material and Method:** Data was collected from chart review between September 1994 and April 2010. Patients presenting in extremis with suspected cardiac trauma will receive emergency room thoracotomy. Patients with equivocal Focused Assessment with Sonography for Trauma will receive formal transthoracic echocardiography. If still in doubt, the authors' policy will proceed with intra operative subxiphoid window and a set up for median sternotomy.

**Results:** Throughout the study period, 44 patients had cardiac trauma and the overall mortality rate was 13.6%. Four patients had blunt injury resulting in one ventricular septal defect and three ruptured right atrium. Right ventricle was injured the most 44%, right atrium 23%, left ventricle 20%, left atrium 2%, one patient had superior vena cava injury, and another patient had inferior vena cava injury. In this cohort, 30% underwent emergency room thoracotomy. Associated injuries were presented in 38% of cases.

**Conclusion:** High index of suspicion and prompt management for cardiac trauma should be considered in patients presenting with injuries to the chest, which has been the authors' policy for the past 16 years. The mortality rate had dropped from 26% to 4% but is not statistically significant.

**Keywords:** Cardiac trauma, Focused assessment with sonography for trauma, Echocardiography, Subxiphoid window

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