**Antibiotics in prehospital trauma care: a rational approach.**

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**INTRODUCTION**

Worldwide 1400 people die each day from sepsis and this number is expected to grow at a rate 1.5% each year. Trauma patients are more susceptible to infections demanding a tight vigilance and a high degree of suspicion to diagnose and treat septic situations. Prophylactic antibiotherapy (ATB) is given to some trauma patients in hospital settings, specially those with open fractures, perforated wounds and emergency iatrogenic manoeuvres.

**METHODS**

We retrospectively analysed, from 2003 – 2005, our medical records, concerning the trauma patients attended by our Prehospital Emergency Medical Team (VMER). All deaths on site or during transportation were excluded from this study. The anatomical segments involved on trauma, perfusion abnormalities, consciousness level (Glasgow Score), prehospital technical procedures, time spent on the scene and during transportation, the level of the trauma centre that received our patients were all subject of analysis.

**CONCLUSION**

Trauma patients are a high risk group for infection and sepsis. The compliance with the surviving sepsis campaign bundles, especially concerning the precocity of prophylactic ATB administration, under a tight protocol, should be considered and studied in the future.