Categorie: LTR, wat doen we ermee?
Presentatie voorkeur: Orale presentatie

Comparing the registrations of trauma patients in the DGU (Deutsche Gesellschaft für Unfallchirurgie) and the LTR (Nederlandse Landelijke Traumaregistratie)

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Introductie

At the University of Groningen (UMCG), trauma patients have been included in the Dutch LTR as well as the German TR-DGU trauma registries. This gives the opportunity to gain insight into what level the data of both trauma registries are comparable for international benchmarking.

Methode

Data of UMCG patients who were registered in the LTR as well as the TR-DGU between 2015-2022 were used (N=1430). Statistical comparisons (TR-DGU vs LTR) that were made were: injury severity (NISS, ISS) and survival probability (TRISS/RISC-2 and PSNL) were compared by means of the paired-samples Wilcoxon Signed-Rank tests

Resultaten

A small significant difference was found between the ISS_{DGU} and ISS_{LTR}, with medians of 26 and 25 respectively (p= 0.019). The difference between $NISS_{DGU}$ (median 34) and ISS_{LTR} was larger and also statistically significant (p=0.000). Data of 1023 patients were available for survival probability analyses, of which 189 died during hospital admission. According to $TRISS_{DGU}$ 218 patients were expected to die, according to $RISC-2_{DGU}$ 195 patients were expected to die. According to $PSNL_{LTR}$ 226 patients were expected to die. according to LTR a higher mortality rate that was expected compared to DGU. RISC2 scored the mortality rate most accurately.

Conclusie

The injury severity according to ISS was comparable between the LTR and TR-DGU. However injury severity scored with NISS was significantly higher. Difference in the survival probability scoring between the systems was observed. Both systems underestimated the survival of patients, with the LTR making the biggest underestimation.