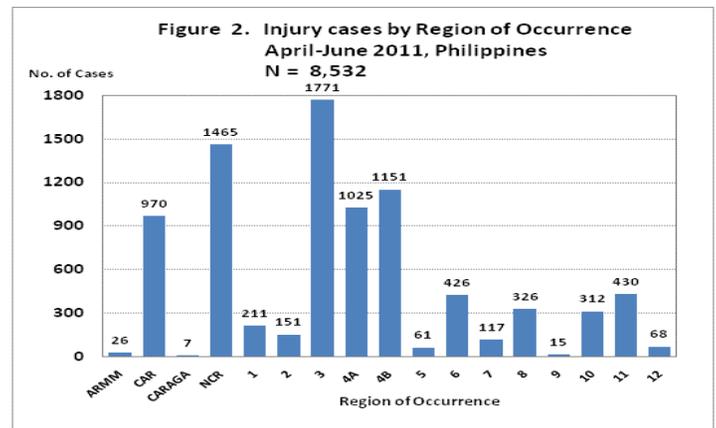
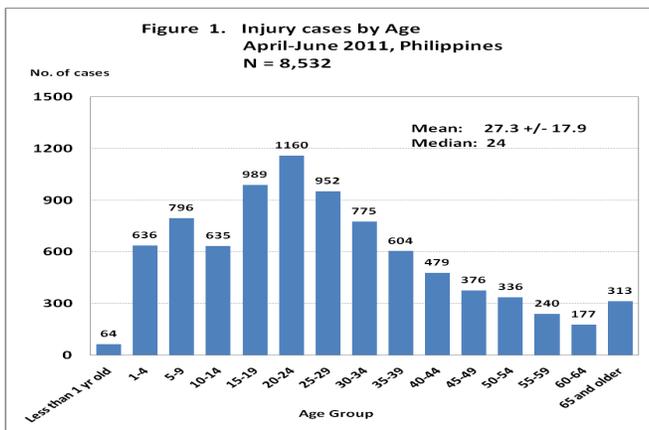


National Electronic Injury Surveillance System (NEISS) Factsheet

November 2011

Volume 3, Issue 2

2nd Quarter (CY 2011) Key Findings:



NEISS registered a total of 8,532 injury cases for the 2nd quarter of CY 2011 (consultation date). Reports came from 62 hospitals (government and private) which account for 3.4% of the total number of hospitals in the country.

There was a notable 26.2% decrease in the total number of hospitals that uploaded reports in the NEISS for the 2nd quarter from the 84 total number of hospitals that uploaded last quarter. A little more than half (52.6%) of the reported injury cases for the 2nd quarter of 2011 came from DOH hospitals.

General Data:

- More than half (57.7%) of the total reported cases of injuries occurred among 20-59 age group. Injuries among children (aged 0-19) accounted for 36.6% of the total reported cases including the 8.3% cases involving children less than 5 years of age. Injury cases among older persons (60 years and over) accounted for 5.8%. The mean age is 26.3 while the median is 24 ;
- Male to female distribution ratio is a little over 2 : 1 with 72.1% males and 27.9% females. Almost the same distribution is noted across different age groups except for the

group of the older persons (65 and above) which has nearly 1:1 male to female ratio with the males slightly outnumbered by the females.

- Majority (99.4%) of those who sustained injuries were Filipinos and the remaining were of other nationality such American, Japanese, Indian, Australian, German, French, Chinese, Indian, New Zealander, Briton, Congolese, Malaysian, Spaniard, Belgian, South and North Korean, Pakistani, Macedonian, Canadian, and including 2 cases whose nationality was not indicated.



Key Findings (continued):

- Twenty five percent of the injuries reported occurred between 4:00 pm to 7:59 pm while 23.3% between 8:00 am to 12:00 pm ;
- There were 92.3% reported injury cases attended at the ER, 5.8% at the OPD and 1.9% were in-patient;
- Majority (80.9%) of the total injury cases were unintentional or accidental while 17.3% accounted for intentional (violence) and 0.9% were intentional (self inflicted) injury cases;
- Multiple injuries were sustained by 34.3% of the total injury cases reported ;
- Most commonly sustained types of injury were open wound / laceration, abrasion and contusion with 44.9%, 30.4% , 15.8% , respectively. There were also cases of closed fracture (10.6%), avulsion (3.1%), burn (2.0%), concussion (1.7%), open fracture (1.5%) and traumatic amputation (0.4%)
- Topping the list of external causes of reported injuries is Transport/Vehicular Accident with 30.9%. Fall was the next common cause with 16.6% followed by contact with sharp objects with 15.9% and mauling (14.2%). There were also cases of injuries caused by bites/stings (5.5%), burns(1.8%), gunshots (0.8%), chemicals (0.3%), hanging (0.1%), drowning (0.1%) and other causes (0.7%);
- Most (40.3%) of the injuries occurred on the road, 25.0% happened at home and 5.3% at the workplace. A considerable percentage (19.4%) of the reported injury cases still with unknown place of occurrence;
- Also a significant percentage (40.5%) of injury cases were not able to record the activity of the victim at the time of the incident. 23.3% were leisure related, 8.4% happened while at work, 2.3% were sustained during sports activities.

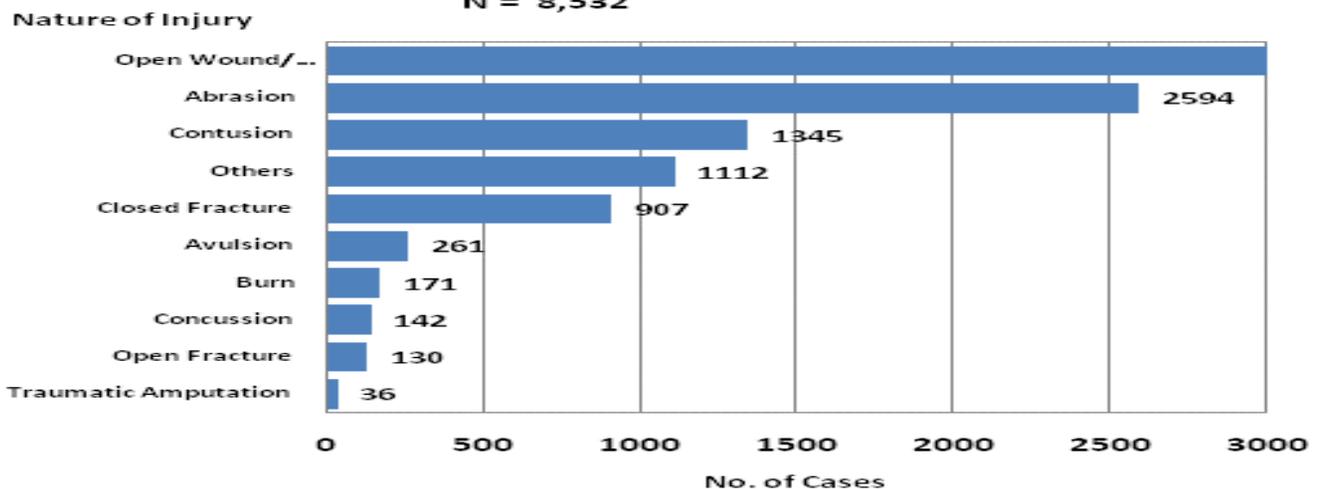
Hospital Data:

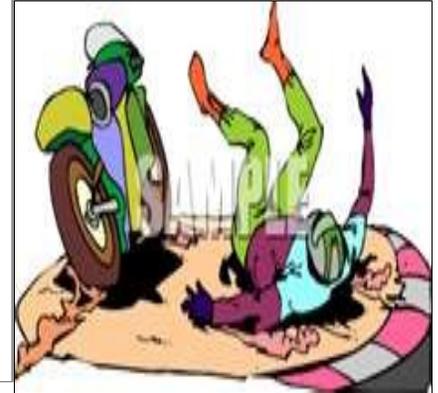
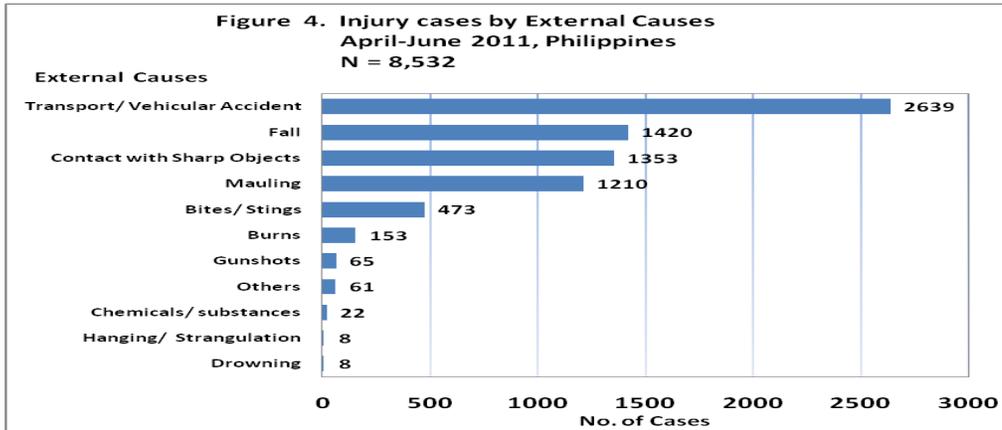
- Almost all (99.3%) of the total reported injury cases reached the hospital alive and only 0.7% were dead upon arrival in the hospital.
- Referred/Transferred cases from other facilities accounted for 2.7% of the total reported cases of injuries;
- At the ER/OPD there were 8,367 cases, of these 75.2% improved and 0.9% were fatal;
- Most (84.9%) of the ER/OPD injury cases were discharged after being treated while 9.0% were eventually admitted for further treatment;
- Among those admitted and in-patient (919 cases), 14.6% improved with only 1 (0.1%) fatality.



“The Life you save maybe your own”

**Figure 3. Injury cases by Type of Injury
April-June 2011, Philippines
N = 8,532**

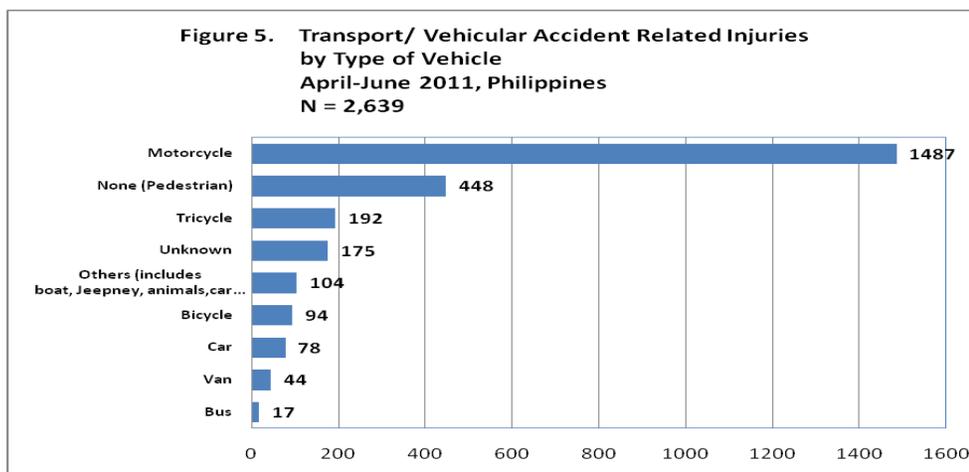




Transport/Vehicular Accidents

- A total of 2,639 transport/ vehicular accident related injury cases were reported for the 2nd Qtr of 2011 (consultation date);
- A little over half (53.0%) of the transport/vehicular accidents were collision accidents ;
- For the 2nd quarter, more transport/ vehicular accident related injury cases occurred in April (46.3%) than in May (35.4%) or June (18.1%);
- Almost 30% of the reported transport/vehicular accident related injury occurrences were in Region 3 . There were also 14.4% transport/ vehicular accident related injury occurrences in Region 4B and 10.8% in region 4A. CARAGA and Region 9 had the least percentages of reported transport related injury occurrences with 0.2%;
- Nearly two thirds (59.1%) of the cases occurred between 8:00 am-7:59 pm with the highest occurrence between 4:00-7:59 pm at 25.0%;
- More males (73.1%) than females (26.9%) were involved in transport/ vehicular accidents;
- Children (aged 0-19) accounted for 30.1% of the total transport/ vehicular accident related injury cases , 54.0% among those aged 20 to 44 , 11.6% in the age group 45-59 and those older persons (60 years and older) accounted for 4.3% ; Mean age of the transport/vehicular accident victims is 30.0 while the median is 25;
- Topping the list of the reported risk factors for transport/ vehicular accident related injury cases was alcohol/liquor at 17.9% ;

- Motorcycle was the most common (56.3%) mode of transport of the injured while 17.0% were pedestrians. There were also 7.3% who were occupants of tricycle. Other modes of transport of the injured were bicycle (3.6%), others including boat, jeepney (3.9%), car (3.0%) and van (1.7%)
- Only 13.4% of those injured motorcycle occupants were reported wearing helmets while 7.7% of those injured car occupants had seatbelts;
- Majority (99.6%) of the injured secondary to transport/ vehicular accident reached the hospital alive. However, 8 of the 10 (80%) dead on arrival cases were motorcycle riders. Seven (87.5%) of the 8 dead upon arrival motorcycle riders were not wearing helmets at the time of the incident;
- Most common injuries sustained related to transport/ vehicular incidents were abrasions (60.5%). Other injuries sustained were open wound/laceration (29.7%), contusion (16.9%), closed fracture (11.7%), avulsion (4.8%), concussion (2.6%), open fracture (2.3%), Burn (0.5%) and traumatic amputation (0.5%).





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The **National Epidemiology Center (NEC)** is a Center of excellence and integrity in field epidemiology composed of dynamic team of highly competent and committed professionals. It aims to provide quality epidemiologic information that is relevant and acceptable to our customers achieved through greater collaboration and participation among various stakeholders including policymakers, program implementers, service providers and community at large.

The **Information Management Service (IMS)** is the gateway of DOH knowledge resources. It aims to ensure access to knowledge for evidence-based decision making by optimizing use of information technologies and through dynamic, responsive, integrated information systems.

The **National Center for Disease Prevention and Control (NCDPC)** is Asia's pride in disease prevention and control. It aims to lead and synchronize all efforts in disease prevention and control towards healthy families and communities through good governance, dynamic partnerships and shared values.

The **National Center for Health Promotion (NCHP)** is the Center of excellence in health promotion that takes the leadership in the implementation of national health communication campaign including media management/ placements as determined by DOH management.

Recommendations:

On the findings:

On the findings:

1. Injury prevention is everybody's concern, thus, everyone must be involved in the planning of strategies on injury prevention.
2. Injury prevention demands a systems approach due to the very nature of the multiple, concurrent actions that must be taken together by both individuals and agencies;
3. Setting rules should not be an end in itself. It is important to ensure compliance to traffic laws through enforcement, information and education;
4. Improve coordination on road safety concerns among all authorities;
5. Fall prevention interventions should be developed and/or implemented

On the ONEISS System:

1. Compliance of DOH hospitals to the reporting of injury cases through the NEISS must be required to minimize problems on underreporting.
2. Data validation protocols must be implemented to ensure timeliness of the report
3. For trending purposes, uploading of injury cases by the identified sentinel sites must be ensured.

*Safety is everyone's
responsibility...*

