Subject: [Fwd: BC Mountain bike trauma statistics!]

Date: Wed, 07 Jul 2004 18:10:03 -0700 From: Brian Platts

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To: Corrie Kost <kost@triumf.ca>

Subject: BC Mountain bike trauma statistics!
Date: Wed, 07 Jul 2004 16:19:51 -0700
From: M E Craver <mecraver@shaw.ca>

To: Mayor and Council - DNV <Council@dnv.org>, Senior Management Committee <managecomm@dnv.org>

CC: James Ridge <James_Ridge@dnv.org>, "FONVCA (E-mail)" <fonvca@fonvca.org>

Dear Mayor Council and Staff: Please take a look at these statistics. Especially emphasized is the final statement in the Conclusion: "Dangerous or reckless styles of riding **should be discouraged** and **not glorified** as currently." It isn't *just* Monica Craver saying this. There are lot of overworked doctors and nurses, with shortage of beds, in our hospitals saying this. Pay attention! The ambulances are constantly going up and down the mountain, especially in Whistler, picking up foolish injured mountain bikers. There is nothing to glorify in this sport, at all.

Monica Craver

http://search.netscape.com/ns/boomframe.jsp?query=mountain+bike+trauma+injuries+in+british+columbia&page=1&offset=0&result

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MOUNTAIN BIKING INJURIES REQURING TRAUMA CENTER ADMISSION

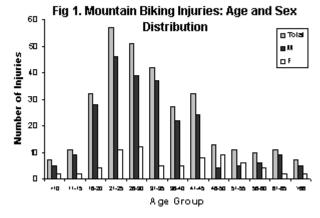
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Background: Mountain biking has become an increasingly popular recreational and competitive sport with increasingly recognized risks. The purpose of this study was to review serious injuries requiring trauma center admission related to mountain biking.

Methods: Two trauma centers in the Greater Vancouver area exclusively serve 3 mountain bike parks and the North Shore Mountains biking 'Mecca'. The Trauma Registries at these centers were reviewed for bicycling related injuries requiring admission from 1992 to 2002. Chart review was performed to further characterize injury patterns. The data were analyzed according to demographics, distribution of injuries, severity of injuries, need for operative intervention, length of hospital stay and disposition from the hospital.

Results: A total of 787 patients were identified as having sustained bicycling injuries. Of these, 312 patients sustained 968 mountain biking injuries. Operative interventions (235 procedures) were necessary in 210 (67%) patients. One patient died from his injuries.



Conclusion: Mountain biking results in serious injuries requiring trauma center admission and frequent operative intervention. Young males are principally at risk. Injury prevention programs should target riders of all ages but especially young males. The use of protective equipment and appropriate training should be encouraged and supported by the industry, bike parks and health professionals. Dangerous or reckless styles of riding should be discouraged and not glorified as currently.

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Injury Type

Type	Injuries (n,%)	Operations (n,%)	Mean AIS
Orthopedic	443(46)	140(59.6)	3±1
Head/Neck	137(14)	2(0.9)	3 ± 1.7
Face	107(11)	24(10)	2 ± 0.7
Thoracic	107(11)	22(9.4)	3 ± 1.1
Spine	98(10)	29(12.3)	-
Abdominal	76(7.9)	18(7.7)	3±1.1

Table 1. Injury Distribution, Severity and Interventions.

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