

Emergency

An emergency is a situation that poses an immediate risk to health, life.

see [Emergency department](#).

see [Emergency surgery](#).

Most emergencies require urgent intervention to prevent a worsening of the situation, although in some situations, mitigation may not be possible and agencies may only be able to offer palliative care for the aftermath.

The [decision](#) to evacuate or shelter-in-place is fundamental to emergency response, especially for a vulnerable [population](#). While an elevated [risk](#) of [mortality](#) due to a hasty, unplanned [evacuation](#) has been well documented, there is little [research](#) on and [knowledge](#) about the [health](#) consequences of sheltering-in-place in [disaster](#) contexts.

We compared hospital mortality in patients who sheltered-in-place (non-evacuees) after the incident with the baseline preincident mortality and articulated postincident circumstances of the hospital while sheltering-in-place.

Shimada et al., considered all 484 patients admitted to Takano Hospital (located 22 km South of the Fukushima Daiichi nuclear power plant) from 1 January 2008 to 31 December 2016.

Significant differences in mortality rates between preincident baseline and three postincident groups (evacuees, non-evacuees (our major interest) and new admittees) were tested using the Bayesian survival analysis with Weibull multivariate regression and survival probability using the Kaplan-Meier product limit method. All the analyses were separately performed by the internal and psychiatry department.

After adjusting for covariates, non-evacuees in the internal department had a significantly higher mortality risk with an HR of 1.57 (95% credible intervals 1.11 to 2.18) than the baseline preincident. Of them, most deaths occurred within the first 100 days of the incident. No significant increase in mortality risk was identified in evacuees and new admittees postincident in the department, which were adjusted for covariates. In contrast, for the psychiatry department, statistical difference in mortality risk was not identified in any groups.

The mortality risk of sheltering-in-place in a harsh environment might be comparable to those in an unplanned evacuation. If sheltering-in-place with sufficient resources is not guaranteed, evacuation could be a reasonable option, which might save more lives of vulnerable people if performed in a well-planned manner with satisfactory arrangements for appropriate transportation and places to safely evacuate ¹⁾.

Neurosurgical emergency

[Neurosurgical emergency](#)

Books

Atlas of Emergency Neurosurgery

This [book](#) is part of the Neurosurgical Operative Atlas Series co-published by Thieme and the [AANS](#).

It is a step-by-step visual guide to performing [neurosurgical procedures](#) used in [neurotrauma](#) as well as non-traumatic emergency cases. The chapters address such topics as [head injury](#) and [stroke](#), [shunt failure](#), central nervous system infection, [pituitary apoplexy](#), and reconstructive procedures. Special sections on pediatrics as well military-related injuries are also included.

More than 500 , full-color illustrations help clarify each procedure

Contains the most current information on how to perform emergency neurosurgical procedures

Concise presentation of procedures gives readers quick, easy access to key information

This atlas is a guide for neurosurgery [residents](#) who are participating in emergency procedures while on call and need to deal with operative trauma situations. It is also an practical reference for neurosurgeons performing emergency neurosurgical interventions on a regular basis.

1)

Shimada Y, Nomura S, Ozaki A, Higuchi A, Hori A, Sonoda Y, Yamamoto K, Yoshida I, Tsubokura M. Balancing the risk of the evacuation and sheltering-in-place options: a survival study following Japan's 2011 Fukushima nuclear incident. *BMJ Open*. 2018 Jul 28;8(7):e021482. doi: 10.1136/bmjopen-2018-021482. PubMed PMID: 30056383.

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