

## Delivering trauma care services in time of COVID-19

Previous outbreaks have demonstrated that when health systems are overwhelmed, mortality from treatable conditions can also increase dramatically<sup>1,2</sup>. With the continuing risk of a COVID-19 community outbreak in Gaza, and the divergence of resources to manage COVID-19 emergency, it is essential to ensure that essential healthcare services, including time-sensitive trauma care needs remain an equal priority.

The pillars of trauma care include the full spectrum of care, from the prehospital care, to point to an acute care facility, and then specialised care and to rehabilitative care.

### Activities from January – May 2020

#### (1) Prehospital care

- PRCS continues to provide prehospital ambulance services. Since the beginning of the year, 9526 cases were transferred from the field to the ED by PRCS ambulances. It is the 4.1% of the total number of cases admitted to Gaza Emergency Departments for the same period.
- In the month of May, WHO in partnership with MDM-France is training 350 frontline health care providers on the rationale use of PPE.
- Challenges:
  - Support in establishing a centralised ambulance dispatch centre, has been delayed due to the restrictions of essential supplies by Israeli authorities
  - Limited access to PPE is increasing risk of COVID-19 contamination for paramedics.

#### (2) Acute care

- The chief complaint of patients arriving in the six major Gaza MoH Emergency Departments remains trauma-related: 93% in Jan, 86% in Feb, 86% in March and 88% in April. A total of 249,234 patients needed trauma care until the end of April 2020.
- 13 out of the 14 MoH emergency departments (ED) are continuing to operate. Respiratory triage centres have been set-up next to the EDs for the optimal management of COVID-19 suspected patients.
- 5354 emergency surgeries took place in the six major Gaza MoH hospitals.
- In Al Awda Hospital elective surgical activities were decreased by 50%. In parallel, clinical training activities are frozen, while a specialised COVID-19 related training on PPE has been delivered to the health personnel.
- Al Amal PRCS Hospital has paused all activities and EGH oncology department has been entirely transferred from EGH to PRCS. The Al Amal Hospital guest-house is being used by MoH as quarantine space for suspect cases.
- Challenges:
  - Mass casualty management training for MoH emergency departments, targeting 250 clinical staff was postponed.
  - International - EMTs deployed to support trauma surgery was postponed.

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<sup>1</sup> Elston, J. W. T., Cartwright, C., Ndumbi, P., & Wright, J. (2017). The health impact of the 2014–15 Ebola outbreak. *Public Health*, 143, 60-70.

<sup>2</sup> Parpia, A. S., Ndeffo-Mbah, M. L., Wenzel, N. S., & Galvani, A. P. (2016). Effects of response to 2014–2015 Ebola outbreak on deaths from malaria, HIV/AIDS, and tuberculosis, West Africa. *Emerging infectious diseases*, 22(3), 433.

### (3) Specialised care: limb reconstruction and osteomyelitis

- Since January 2020, 76 patients were newly admitted to the MSF France osteomyelitis treatment centres, over a total of 102 patients. In MoH Nasser Hospital Centralised Limb Reconstruction Centre, 75 patients were admitted for the same period.
- The MSF France osteomyelitis department in Nasser hospital has been handed over to the MoH, to be used for patients in need of COVID 19 quarantine, after returning from WB.
- Complementary to the MoH limb reconstruction Unit, MSF Belgium admitted 96 patients for limb reconstruction and Al Ahli Arab Hospital admitted 203 patients.
- MAP-UK deployed 3 specialised cell EMTs: An abdominal sonography training for 25 clinicians took place, as well as a neonatal life support training for 22 health care workers. Regarding Limb Reconstruction activities, MAP UK EMT has screened 70 patients and performed 11 surgeries.
- Challenges:
  - MoH Limb Reconstruction Centre admitted 10 new patients in April and conducted 11 time-critical operations, this represents a 56% decline in admission rates.
  - For May, 8 patients were newly admitted and 9 time-critical operations.
  - The deployment of more than 5 EMTs (MAP/ MSF B/ WHO) had to be postponed, according to the EMT- Coordination Cell.
  - MSF France's osteomyelitis management centre at Dar-es-Salaam hospital has stopped, and will resume operations in the coming period.
  - Microbiology services for bone sampling is being achieved with support from the MSF France, and it is currently frozen.

### (4) Rehabilitative care:

- A total of 691 physiotherapy sessions, and 2796 MHPSS sessions have been conducted in the WHO supported MoH LRU.
- PMRS outreach team continue serving and have reached 283 beneficiaries, while HI have reached 15747 beneficiaries. Additionally, GCMHP has reached out to 2079 injured patients.
- Challenges:
  - MSF-France have shifted their outpatient care over-the-phone. For March, out of a total of 670 consultations, only 24% were performed in the outpatient department.
  - PMRS have had to stop delivering health awareness and promotion activities.
  - The Patient Allocation Tool (used to remove duplication in services) has not yet been rolled out.