

POSTER PRESENTATION

Open Access

Cocaine use in trauma patients admitted to intensive care medicine. clinical and epidemiological characterization

F Verga^{1*}, A Pascale², J Gil³, A França¹, I Alvez¹, E Echavarría¹, H Bagnulo¹

From ESICM LIVES 2015

Berlin, Germany. 3-7 October 2015

Introduction

Traumatic disease is a leading cause of death in younger patients. Substance abuse is a factor of risk for serious injuries and also influences the recurrence thereof. Detecting consumption is paramount to optimize the management of these patients in the care unit intensive as well as high once for prevention strategies secondary. Within these substances, the incidence of cocaine use in the South American cone is a growing health problem.

Objectives

Determine the prevalence of cocaine use in severe trauma patients. Study the epidemiologic profile of this patients and compare clinical outcomes between cocaine users and non users.

Methods

Prospective observational study conducted from January 2011 to December 2012.

Setting

Polyvalent Intensive Care Unit (ICU) of a tertiary hospital.

Patients: Severe trauma patients admitted to ICU during the study period.

Intervention: Determination of cocaine metabolites in urine.

Main measurements: Prevalence of cocaine use in severe trauma patients, demographic data, mechanical ventilation, complications, length of ICU stay and mortality.

Results

302 patients were included, 82,5% males, age (median \pm interquartile range) 34 ± 27 years, Simplified Acute Physiology Score (SAPS II) 35 ± 26 , mortality 17,2%. Cocaine use was detected in 82 cases (27,2%). Positive cocaine screening patients were younger (30 ± 13 vs 37 ± 31 ; $p < 0,001$) and mostly males (29,7% vs 15,1%; $p = 0,03$). No significant differences were found about mortality, need or duration of mechanical ventilation and length of ICU stay. A significant association between positive cocaine screening and agitated awakening (46,3% vs 30,9%, $p = 0,035$), extubation failure (15,6% vs 6,0%, $p = 0,019$) and late onset pneumonia (48,9% vs 29,5 %, $p = 0,020$) was found.

Conclusions

A high prevalence of cocaine use in trauma patients who were admitted to ICU was found in comparison with international reports. Epidemiological profile includes young males cocaine users with a higher incidence of agitated awakening, extubation failure and late onset pneumonia.

Authors' details

¹Hospital Maciel, Intensive Care Unit, Montevideo, Uruguay. ²Hospital de Clínicas de Montevideo, Toxicology Department, Montevideo, Uruguay. ³Hospital de Clínicas de Montevideo, Statistics Department, Montevideo, Uruguay.

Published: 1 October 2015

References

1. Soderstrom CA, Dischinger PC, Kerns TJ, Kufera JA, Mitchell KA, Scalea TM: Epidemic increases in cocaine and opiate use by trauma center patients. *Documentation with a large clinical toxicology database J Trauma* 2001, **51**(3):557-64, Sep.
2. Dischinger PC, Mitchell KA, Kufera JA, Soderstrom CA, Lowenfels AB: A longitudinal study of forme trauma center patients: the association

¹Hospital Maciel, Intensive Care Unit, Montevideo, Uruguay
Full list of author information is available at the end of the article

between toxicology status and subsequent injury mortality. *J Trauma* 2001, **51**:877-84.

doi:10.1186/2197-425X-3-S1-A726

Cite this article as: Verga et al.: Cocaine use in trauma patients admitted to intensive care medicine. clinical and epidemiological characterization. *Intensive Care Medicine Experimental* 2015 **3**(Suppl 1):A726.

Submit your manuscript to a SpringerOpen[®] journal and benefit from:

- ▶ Convenient online submission
- ▶ Rigorous peer review
- ▶ Immediate publication on acceptance
- ▶ Open access: articles freely available online
- ▶ High visibility within the field
- ▶ Retaining the copyright to your article

Submit your next manuscript at ▶ springeropen.com
