



# Family Support of Children with Politrauma and Severe Trauma

Eva Maria Cojocaru<sup>1</sup>, Roxana Elena Bogdan Goroftei<sup>2</sup>

<sup>1</sup>Departement of Physiology, Faculty of Medicine and Pharmacy, Universitatea Dunărea de Jos Galați, Child neurologist on Clinic Emergence Hospital for Children, Galați, Romania

<sup>2</sup>Departement of Emergence Medicine, Faculty of Medicine and Pharmacy, Universitatea Dunărea de Jos Galați, Emergence specialist on the Clinic Emergence Hospital for Children, Galați, Romania

## Email address:

cojocarumariaeva@yahoo.com (E. M. Cojocaru)

## Abstract:

**Introduction:** Children are often presenting in the emergency room with mild to severe politrauma. This requires rapid and firm actions which can be perceived as brutal by the families. The child will be surrounded by many equipments, special measures must be taken to maintain vital functions and to prevent infection so in many cases parents are invited to step out of the room where the life-saving maneuvers and treatments are done. Frustration, guilt, anxiety, grief and uncertainty are felt by the parents. On the other hand health professionals defy actions under great pressure, uncertainty, sometimes disfunctionality between the saving team members or technical difficulties due to waste or inadequate equipments.

**Methods:** We want to present cases of politraumatized children, acute intervention in the emergency room of the health professionals, and after the overcome of the dramatic moments of the life-saving actions the long term surveillance of the children and their families. Politrauma is due often to car, motor or bike accidents, as also sometimes of suicidal actions of the children. Even if the accident is incidental and is pure randomly family guilt always exist and is hard to overpass. In many situations parents have delegated the surveillance of the child to other children of the family or other relatives (uncles, cousins, grandparents) and then discussions and throwing guilt appear.

**Results: And discussion:** In the presented cases the politraumatized children had all a very good evolution. All the children were treated in our hospitals from Galați and underwent, anticonvulsant therapy, intubation and care in the intensive care unit, as also surgical interventions (for bone fractures or other) and all steps were done with the accompaniment of the psychologist of our clinic.

**Conflict of interest disclosure:** the authors have no conflict of interest and this research has not a financial support for the authors.

## Keywords:

Politrauma, Family Support, Children, Severe Trauma, Intensive Care Unit