



# Using hospital data to understand serious injuries on Irish roads

Capacity Building on MAIS3+

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## Serious injuries on Irish roads

-  Serious injuries in police records
-  Hospital data and translation to AIS
-  Comparison hospital vs police data
-  MAIS3+ casualties
-  Summary and future work

# Serious injuries in Ireland

Police-based statistics



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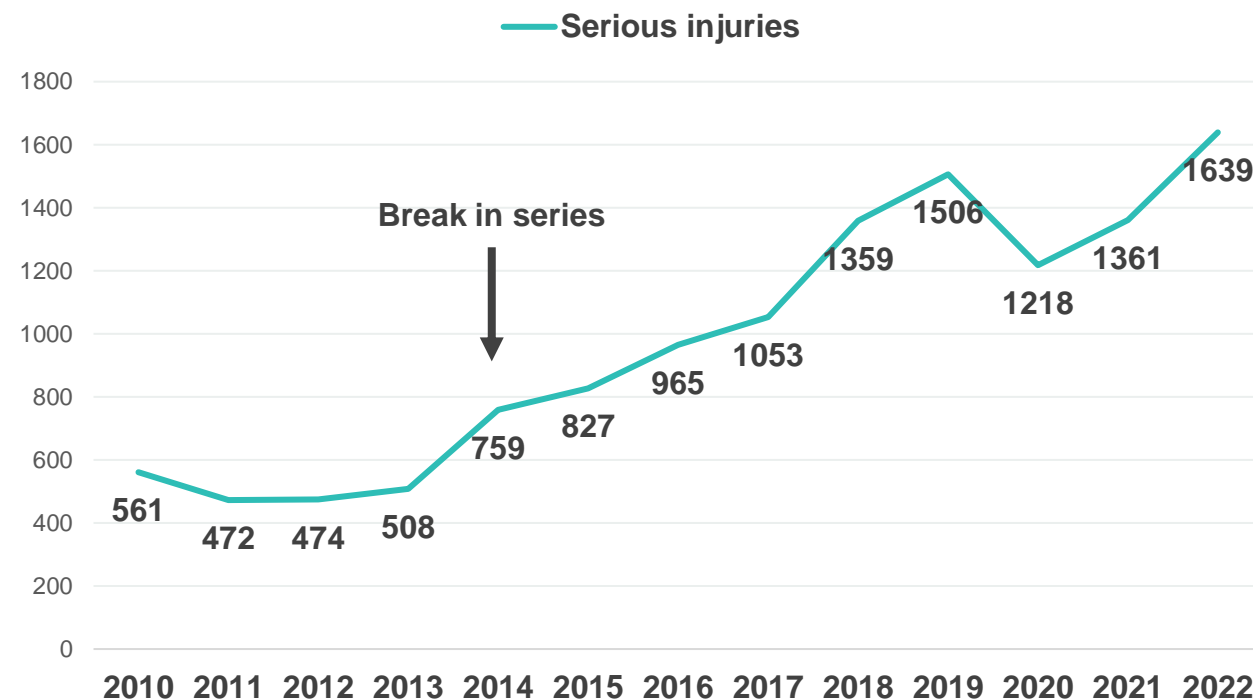
# Serious injuries in police data

## Definition and trend

### Definition of a serious injury:

An injury for which the person is **detained in hospital as an 'in-patient'**, or **has any of the following injuries** whether or not detained in hospital: fractures, concussions, internal injuries, crushing, severe cuts and lacerations, or severe general shock requiring medical treatment.

- **Updated procedure** for recording serious injuries in Ireland by the police since 2014 allowed to have more accurate figures.
- However, underreporting may still be significant.



# The MAIS3+ serious injuries project

## Overview



- The current **Road Safety Strategy 2021-2030** includes specific actions to expand serious road injury reporting with hospital data, to better understand the incidence, cause, management, and outcomes of traumatic road injuries at a national level.

### The MAIS3+ serious injuries project (since March 2022)

- **Primary goal** of reporting on MAIS3+ serious injuries to the EC
- **Greater understanding** of serious injury trends and characteristics in hospital discharge records
- **Partnership** with the HSE National Health Intelligence Unit and Trinity College Dublin Department of Public Health & Primary Care
- **Comparison** of injury trends and characteristics in hospital data with police records, where possible.
- **Exploration** of other sources of data on serious injuries

# Hospital data

Data preparation and translation  
results

Period 2014-2022

# Working with hospital data



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## How do we obtain the sample of injured in-patients

- **HIPE database** – the main source of national data on hospital discharge records from acute hospitals in Ireland.
  - Access agreement, also access to training resources.
- Export discharges including “(S or T) + V” ICD-10-AM codes (8 ed).
- **Data cleaning and deduplication** process to include one record per in-patient, with guidance from experts from the Health Service Executive.
- **Inclusion criteria:** emergency admission, collision occurred on public roads.
- **Exclusion criteria:** readmissions, elective admissions, duplicated records, train/rail users, casualty died within 30 days since admission.
- ICD-10-AM injury codes **translated to AIS using AAAM map\***; then maximum AIS determined for each casualty: MAIS2-, MAIS3+, MAIS9, or missing.
  - **MAIS9** (unspecified severity), and **missing** codes (no translation possible) were excluded from the analysis.

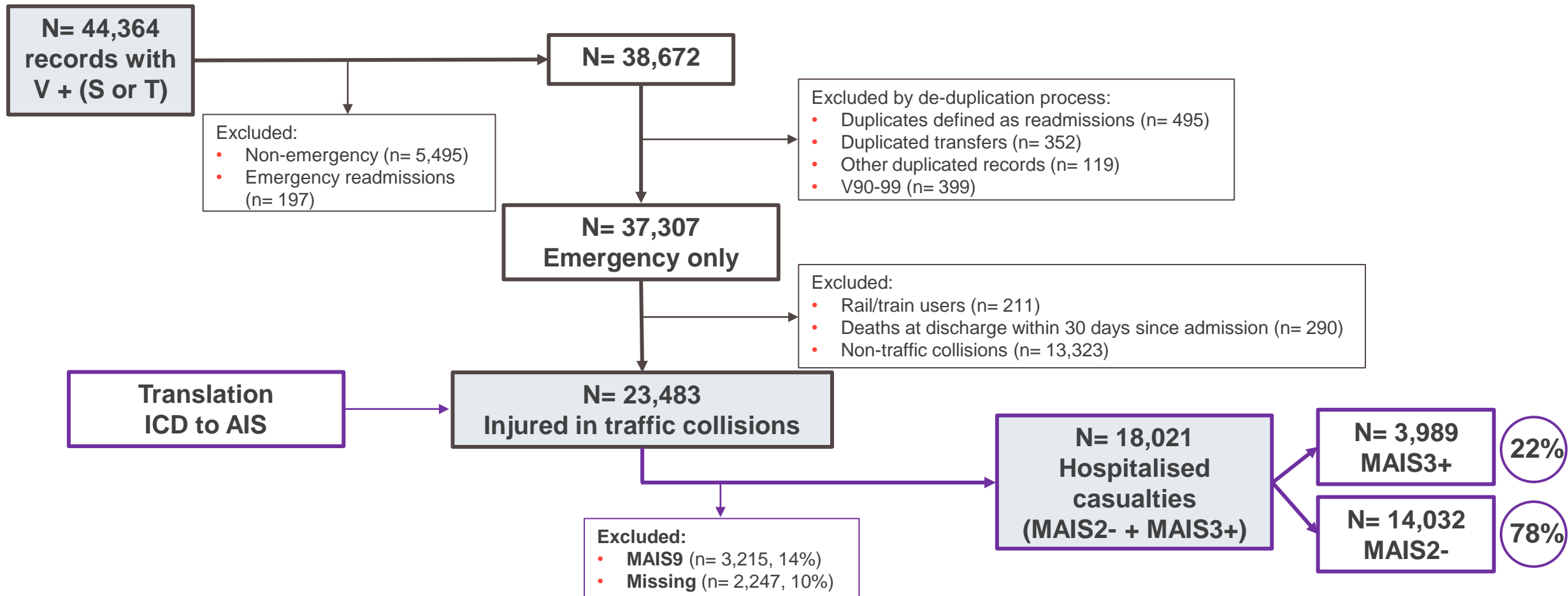
\*Association for the Advancement of Automotive Medicine (2016). Abbreviated Injury Scale (c) 2005 Update 2008. (T. Gennarelli, & e. Woodzin, Eds.) Chicago, Illinois

# Sample flow

## Results from data cleaning and deduplication – 2014-2022



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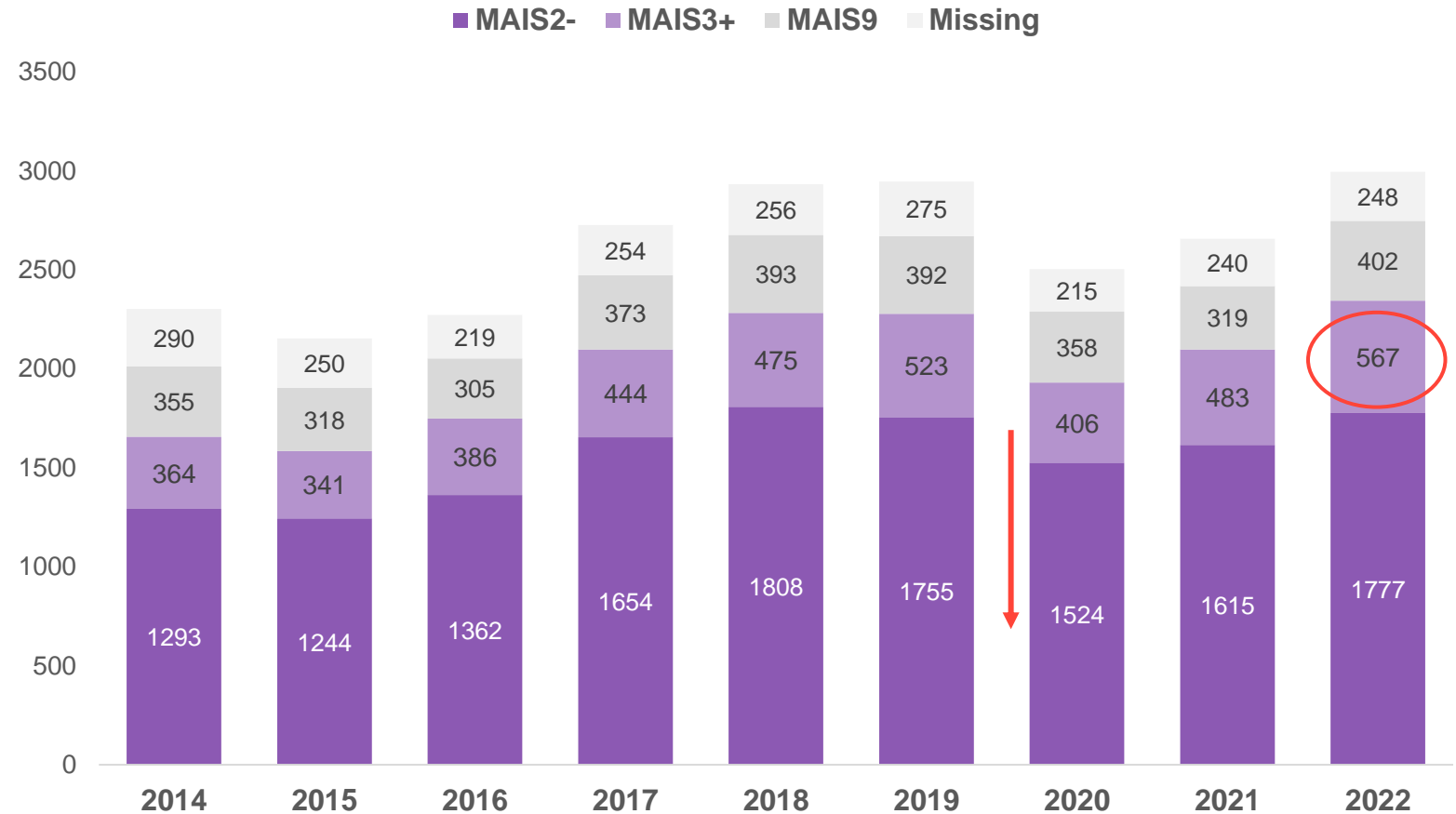




# Translation ICD to AIS

## 2014-2022

- The annual number of **MAIS9** and 'missing' records remained steady over the years.
- Increasing number of **MAIS3+** casualties – the highest in 2022 (56% vs 2014; 8% vs 2019).
- All hospitalised casualties (MAIS3+ + MAIS2- records) declined in **2020**.



# Exploring police underreporting

All hospitalised casualties vs  
police serious injuries

Period 2014-2022

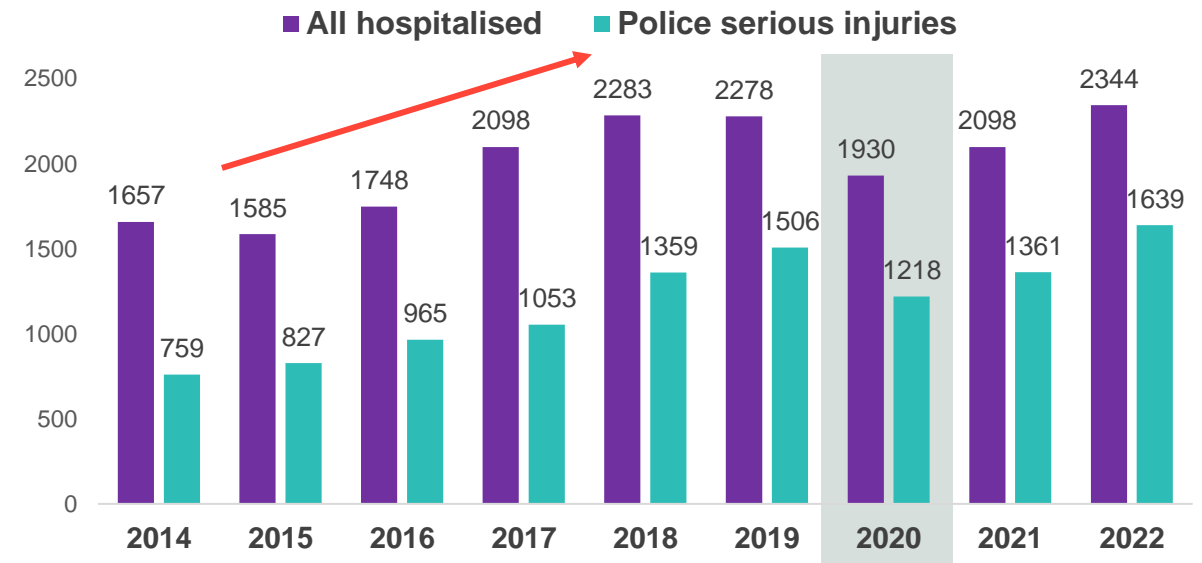
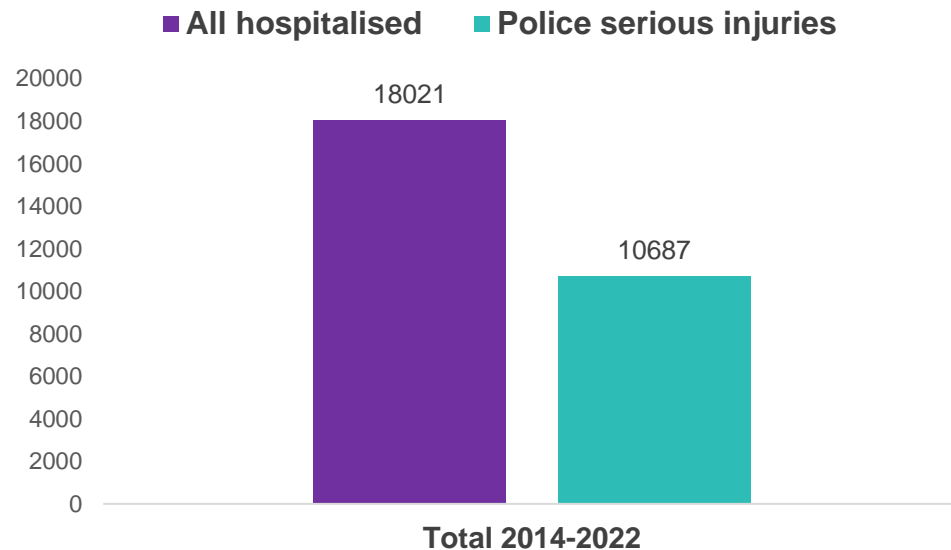
# Hospitalised casualties and police serious injuries



## Total and trend – 2014-2022

- Number of hospitalised casualties is almost 2 times higher than the number of police serious injuries.
- Police definition of a serious injury includes ‘in-patients’.

- The number of hospitalised casualties and police serious injuries increased over the period, and declined in 2020.



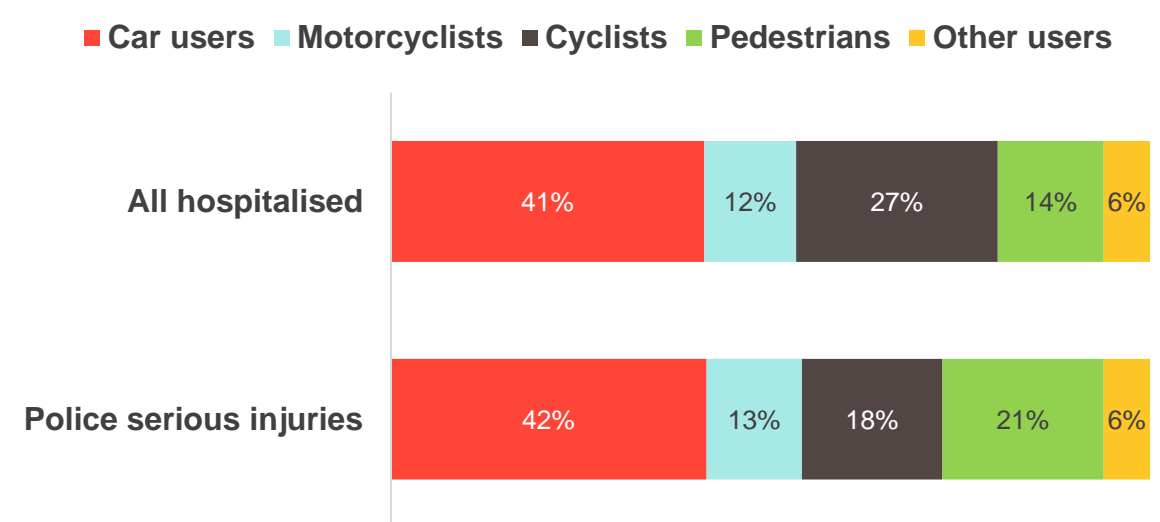
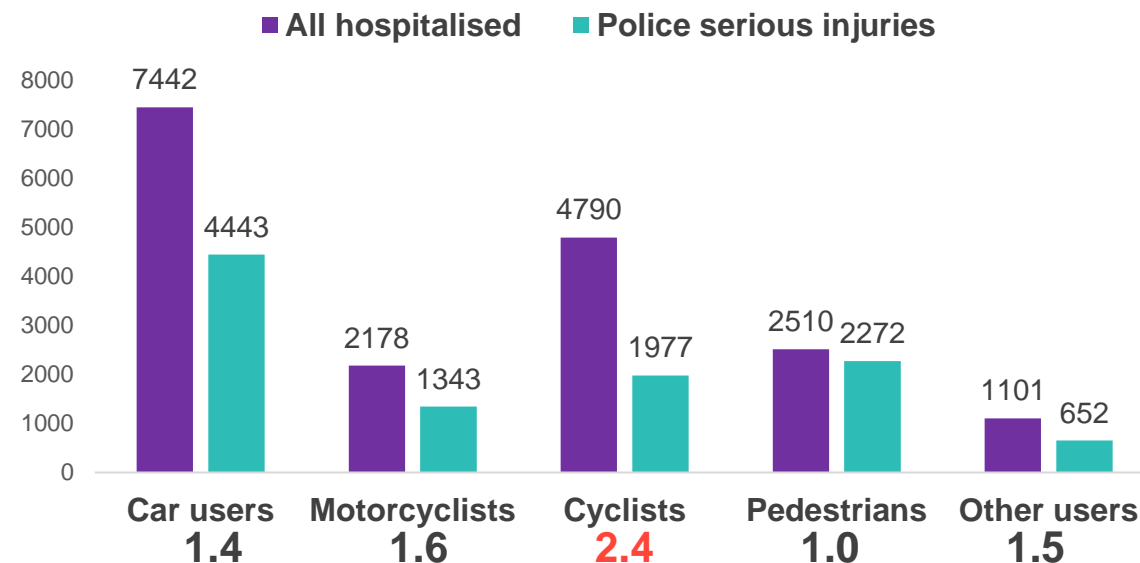
Police data is current as of 7 April 2024. Data for 2020 onwards is provisional and subject to change.



# Total by road user type

## All hospitalised vs police serious injuries – 2014-2022

- Police underreporting was observed for each road user type separately.
- The ‘size’ of the difference was the highest for pedal cyclists:
  - There were between 2 and 3 hospitalised cyclists for each cyclist recorded by the police.
  - Cyclists accounted for 27% of hospitalised casualties and 18% of police serious injuries.
- The absolute number of pedestrians was very similar between datasets.



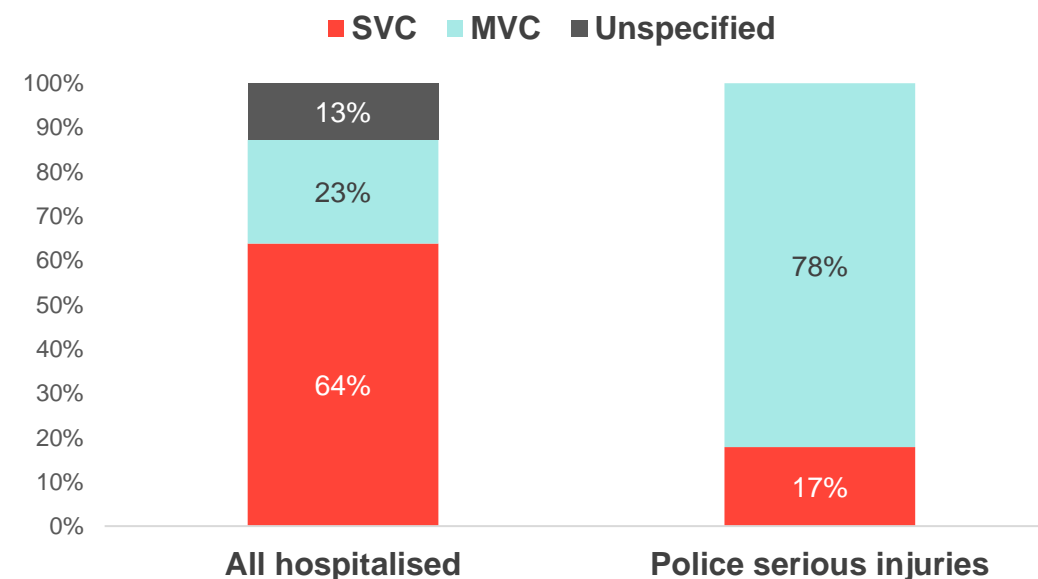
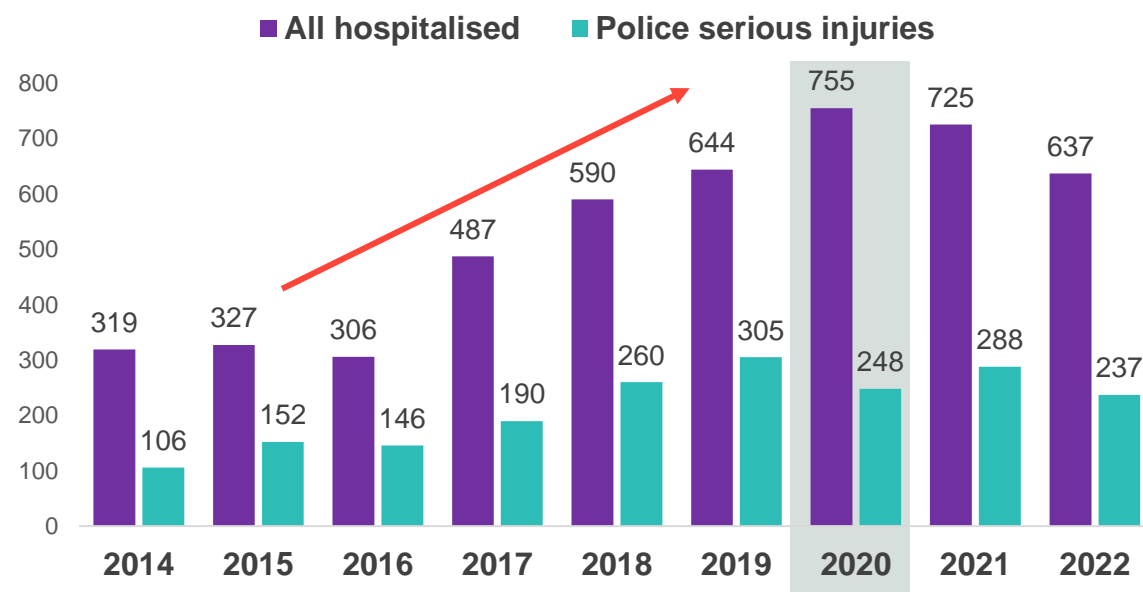
AGS data is current as of 7 April 2024. Data for 2020 onwards is provisional and subject to change. 12

# Pedal cyclists



## All hospitalised vs Police seriously injured – 2014-2022

- The discrepancy between the number of cyclists in hospital and police records was observed each year.
- In 2020, the number of police seriously injured cyclists declined but the number of hospitalised cyclists increased.
- 64% of hospitalised cyclists were injured in **single vehicle collisions (SVC)** vs 17% of police serious injuries.
- SVCs in hospital data increased over the period, even during 2020.



AGS data is current as of 20 October 2023. Data for 2020 onwards is provisional and subject to change.

# MAIS3+ casualties

Hospital data, 2014-2022

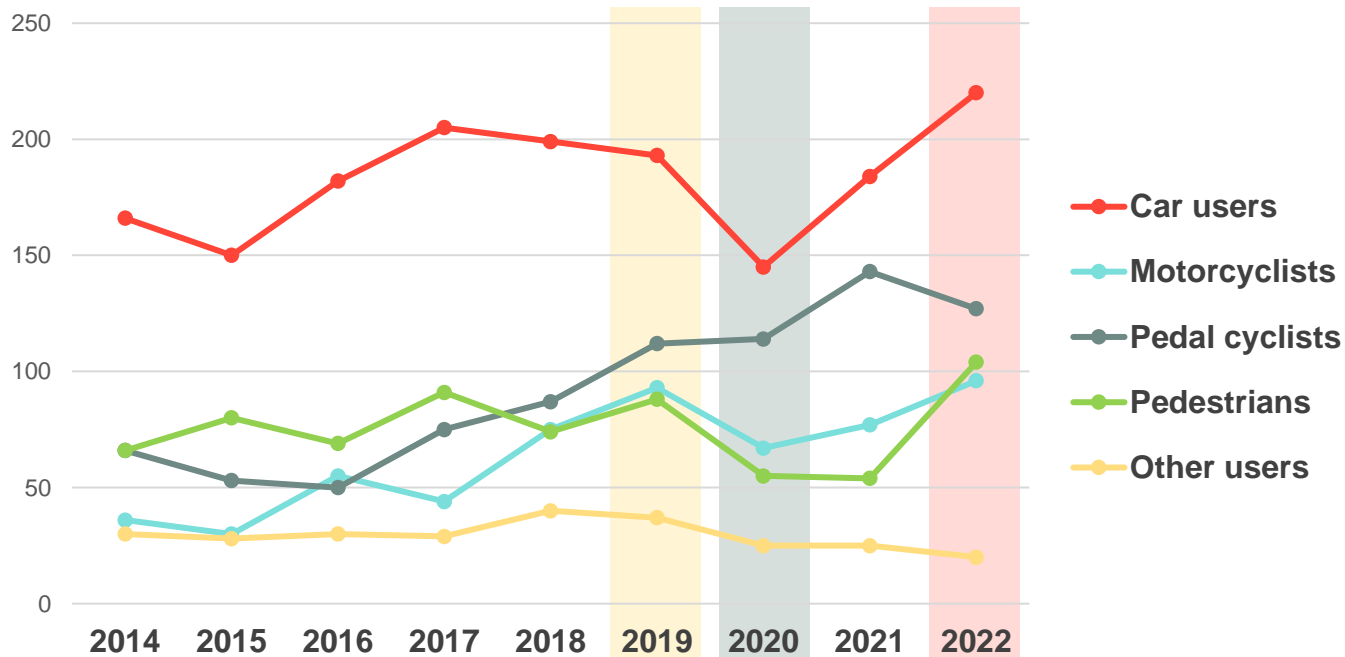
# Road user types

## MAIS3+ casualties – hospital data, 2014-2022



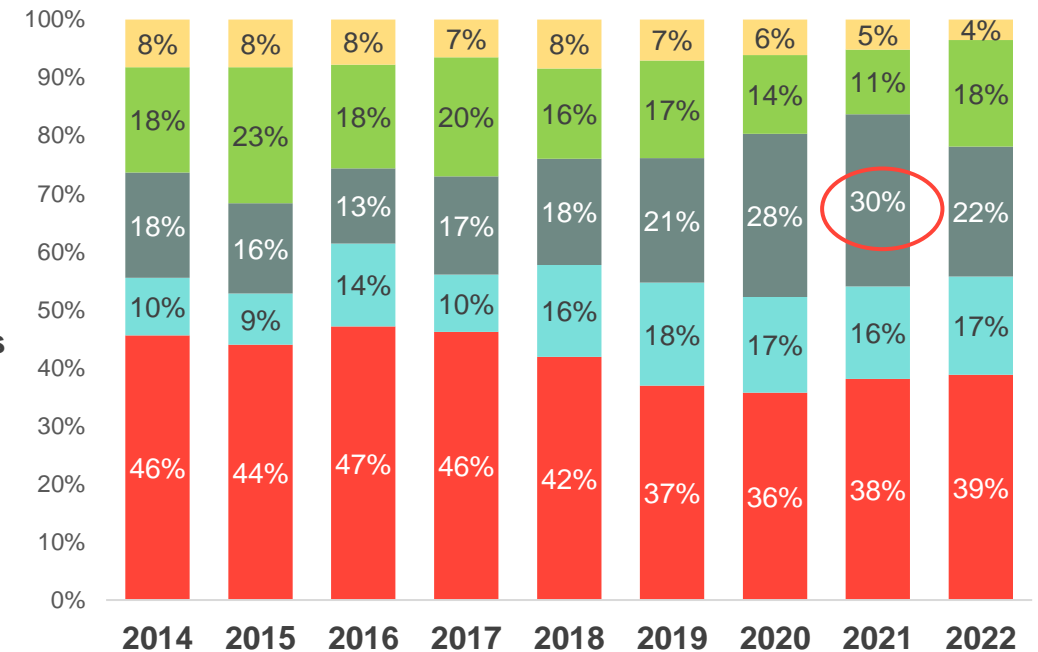
Number of MAIS3+ casualties

- Increase in the number of MAIS3+ car users and pedestrians in 2022.



Distribution of MAIS3+ casualties

- Share of MAIS3+ cyclists increased over the years.



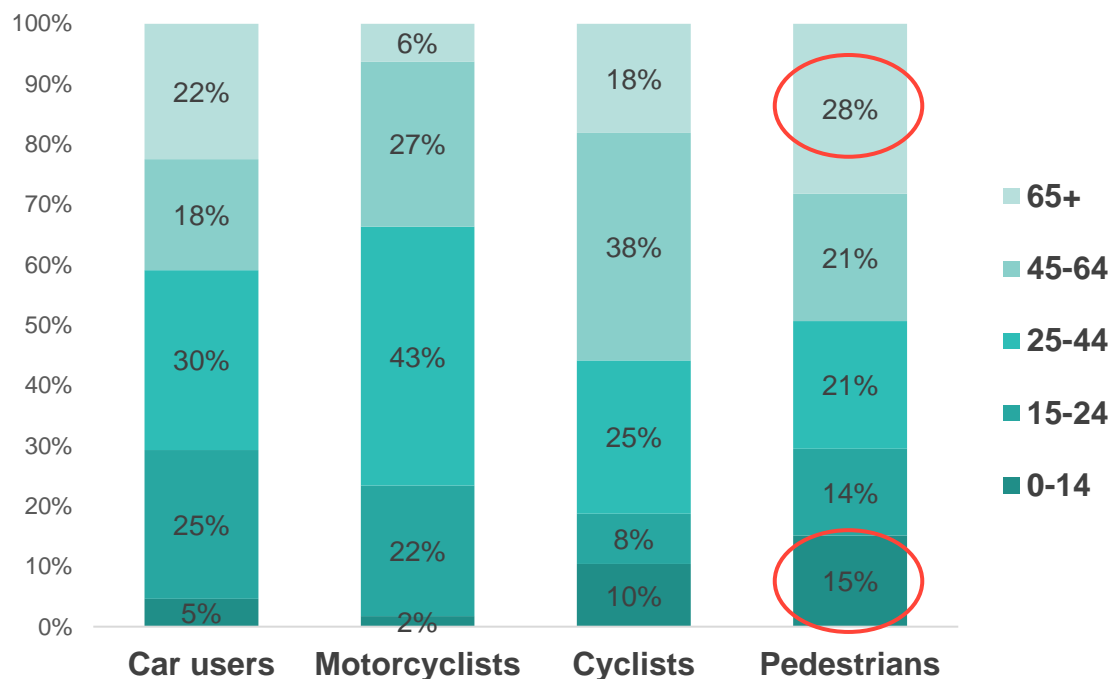


# Age and gender

## MAIS3+ casualties – hospital data, 2014-2022

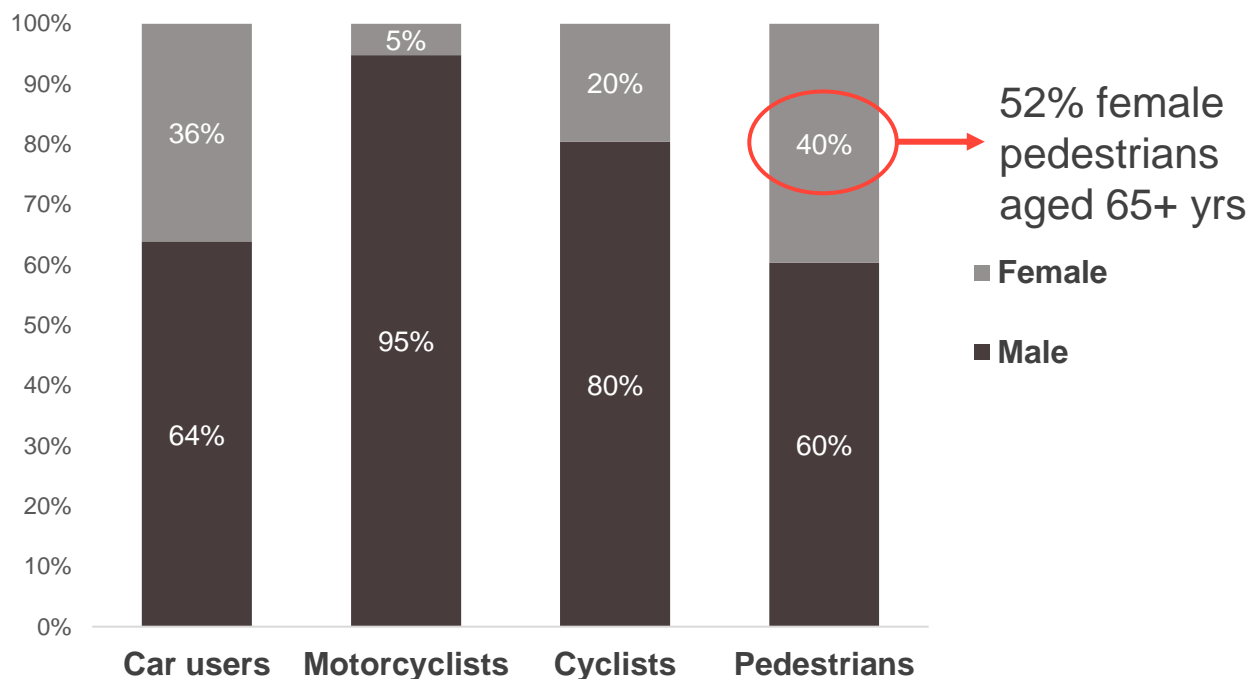
### Age distribution of MAIS3+ casualties

- High prevalence of children and senior casualties among MAIS3+ pedestrians.



### Gender distribution of MAIS3+ casualties

- Most MAIS3+ casualties were males.

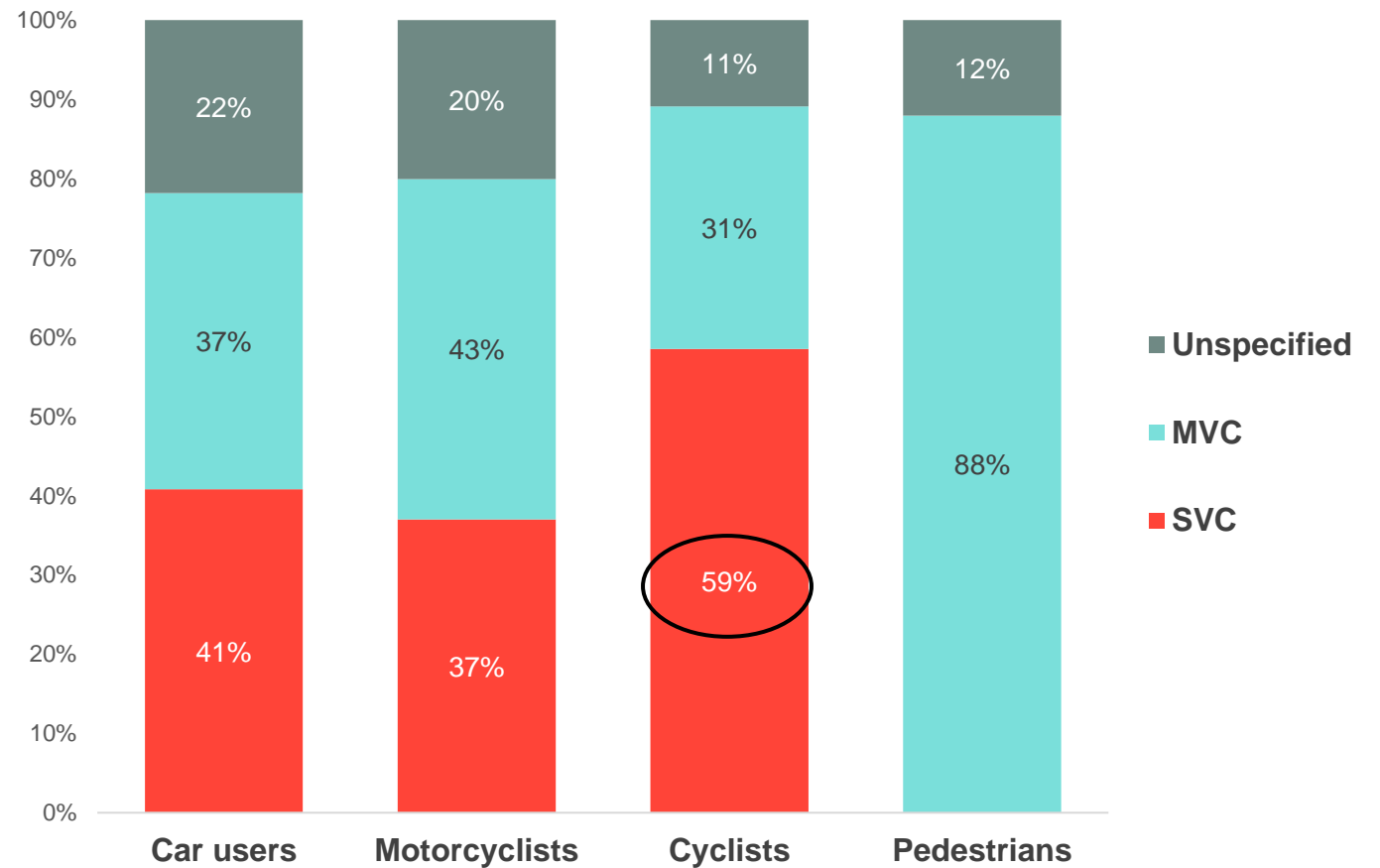




# Collision type

## MAIS3+ casualties – hospital data, 2014-2022

- 76% - 89% of casualties in multivehicle collisions (MVCs) were in a collision with a car, truck, or van.



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# Injuries

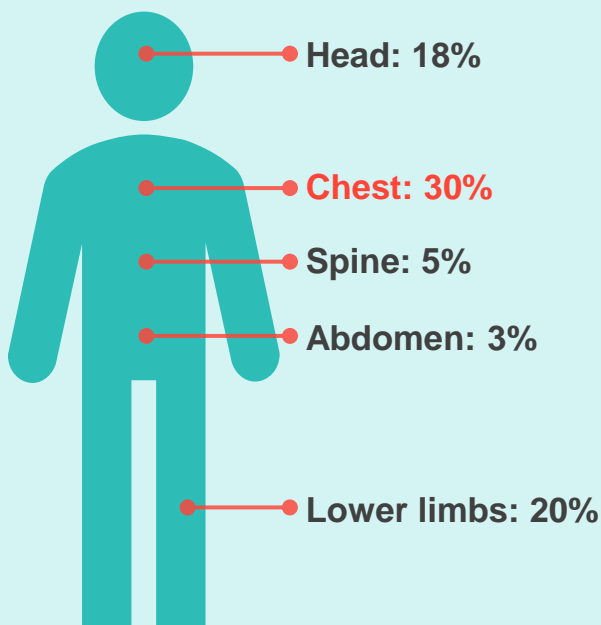
## MAIS3+ casualties – hospital data, 2014-2022



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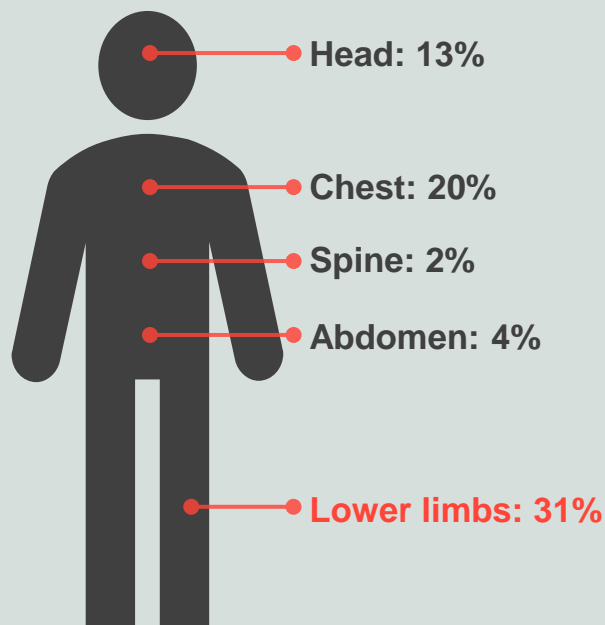


### Car users



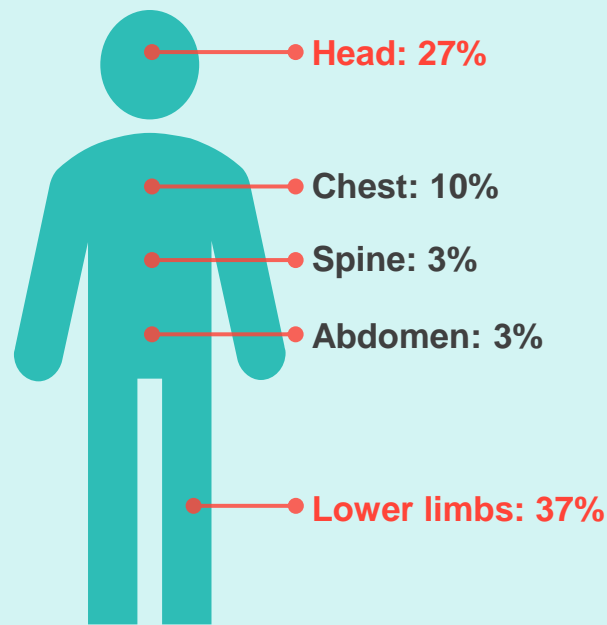
Multiple serious injuries: 23%

### Motorcyclists



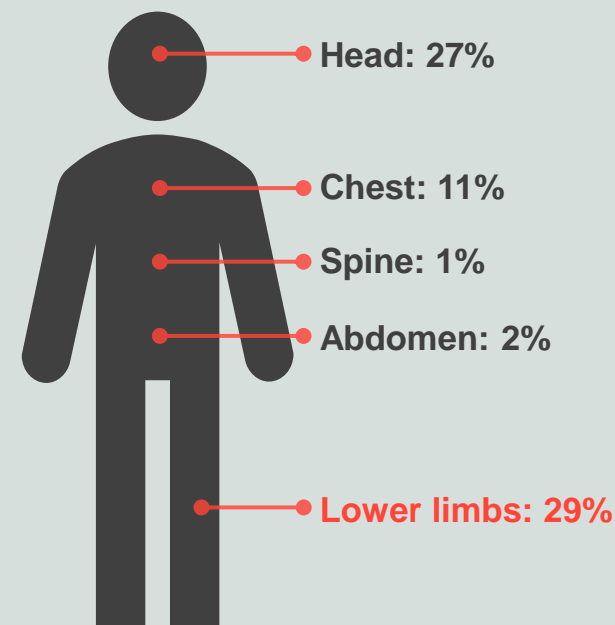
Multiple serious injuries: 30%

### Cyclists



Multiple serious injuries: 18%

### Pedestrians



Multiple serious injuries: 30%

- Brain injuries accounted for 53 - 70% of serious head injuries
- All lower limb injuries were serious fractures
- 80 - 90% of chest injuries were internal

# Outcomes



## MAIS3+ casualties – hospital data, 2014-2022

	Car users	Motorcyclists	Cyclists	Pedestrians	
N days at hospital	5+ days	64%	66%	52%	69%
	Mean (SD)	17.3 (34.8)	14.3 (25.6)	10.8 (25.3)	19.1 (33.8)
	1+ days at ICU	38%	36%	15%	30%
Destination at discharge	Home	61%	66%	79%	59%
	Nursing home	6%	2%	2%	10%
	Rehabilitation	1%	1%	1%	1%
	Another hospital	29%	28%	16%	27%
	Other	3%	3%	2%	2%

24 days among pedestrians aged 65+ years

78% aged 65+ years

# Conclusions and future steps

# Conclusions



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## Key learning points

- Hospital data requires extensive preparation before translation and analysis – collaboration with health service on first phase was essential.
- The ICDmap allowed to assign MAIS to 90% of casualties in our hospital sample. For 14% of casualties the MAIS assigned was unspecified (MAIS9, excluded from analysis).
- Police underreporting was observed for all road users – was the lowest for pedestrians and the highest for pedal cyclists.
- Underreporting of cyclist serious injuries was more marked during the pandemic.
- The prevalence of single-vehicle collisions in hospital data is noteworthy and may contribute to explain this difference between police and hospital records.
- The number of MAIS3+ records steadily increased since 2014 to a peak of 567 casualties in 2022.
- Studying hospital data at a wider scale provided a more holistic understanding of the profile of casualties injured in road traffic collisions.
  - How best to leverage hospital data to inform road safety policy?
  - Dissemination strategy – making results accessible for all stakeholders and the public (reports, infographics, seminar with health partners)

# Future steps



- Publication of reports on MAIS3+ casualties and police serious injuries, by road user type at [RSA.ie](https://www.rsa.ie).
  - Already published: High-level results 2014-2022, cyclist report 2014-2022, methodology report.
- Exploration of new sources of data on serious injuries:
  - Major Trauma dataset – direct AIS coding, TARN methodology.
  - Ambulance data.
- Study the feasibility of linking police and hospital data.
- Consideration of the serious injury target based on MAIS3+.

# Acknowledgements

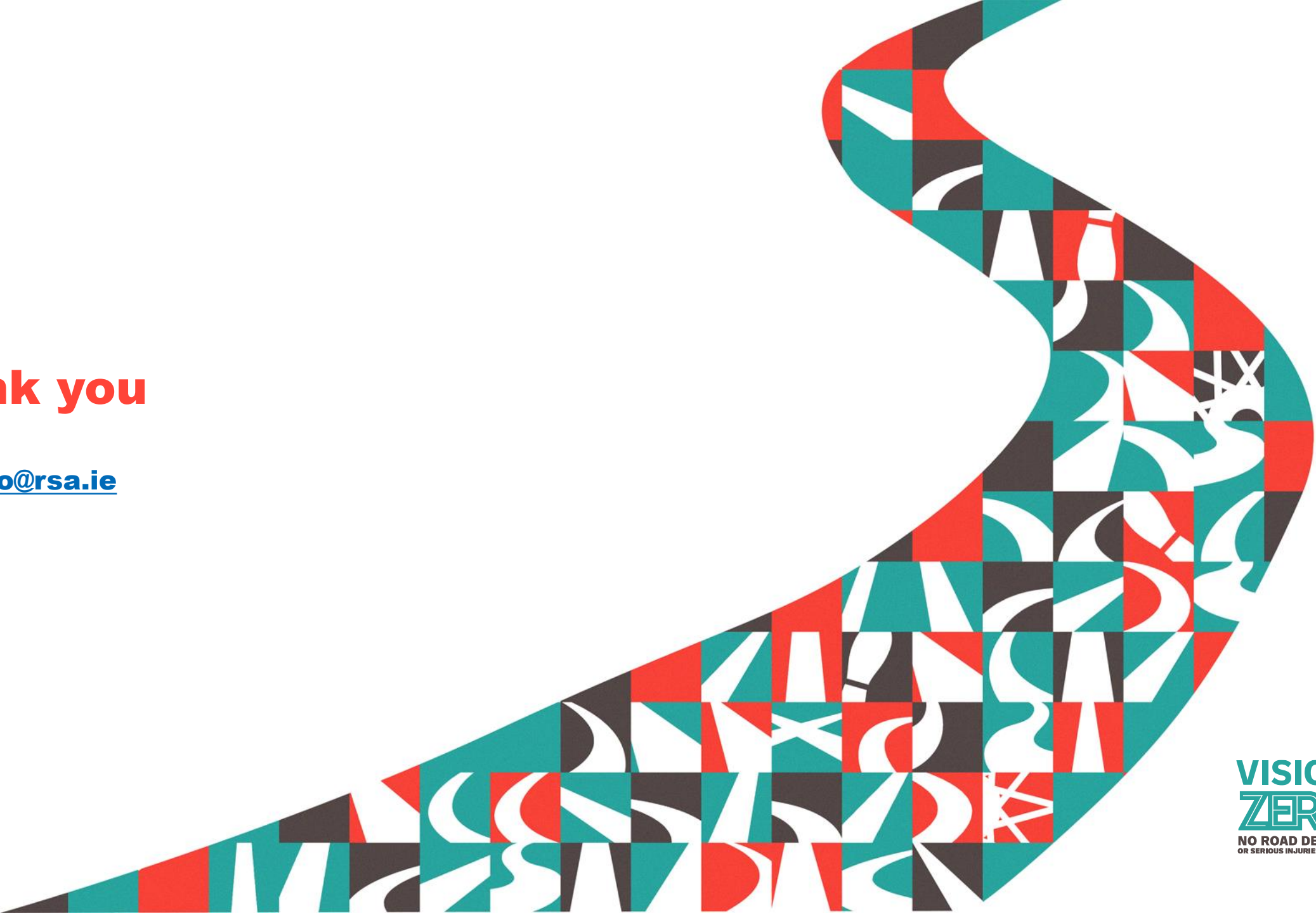
- RSA Research Department
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**Thank you**

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NO ROAD DEATHS  
OR SERIOUS INJURIES BY 2050