

## Facts:

- Every year, trauma causes 4.3 million deaths. For people aged 10-24 and 25-49, it is the leading cause of long-term disability and lost years of healthy life.
- In the US and many other countries, training in ATLS® is mandatory for trauma care physicians - more than one million physicians in over 80 countries have been trained since the first course in 1978.
- ATLS® uptake in LMICs has been slow, potentially due to high costs.

**Project Cycle:**  
2024–2029

**Partners:**  
*The George Institute for Global Health*  
*Karolinska Institutet*

**Supporters:**  
*The George Institute for Global Health*  
*Swedish Research Council*

**Principal Investigator:**  
*Dr Martin Gerdin Wärnberg*

## Background:

- Most deaths from trauma occur within the first 24-48 hours. Most preventable trauma deaths are caused by clinical judgement errors during initial resuscitation or early care, including airway management and haemorrhage control.
- The proprietary Advanced Trauma Life Support® (ATLS®) is the most established trauma life support training program.

## Aims:

- Compare the effects of ATLS® training with standard care on outcomes in adult trauma patients in low- and middle-income countries (LMICs), including recovery before discharge and functional outcomes at and after discharge such as pain, mobility and self-care activities.

## Methods:

- This is a stepped-wedge cluster randomised trial. All clusters (hospitals) will transition through three phases: a standard care phase; transition phase during which the training is delivered; and an intervention phase.
- Adult trauma patients presenting to the emergency departments of 30 hospitals will be recruited for the study. The total sample size will include 4,320 patients across these hospitals.

## Impact:

- Due to its large sample size and geographical representativeness, the study will produce robust evidence comparing ATLS® training to standard care in adult trauma patients, which will enhance our understanding and inform best practices in trauma care.
- Evidence from this study could influence healthcare guidelines and lead to improvements and updates in the training curriculum, enhancing its effectiveness in LMICs.
- By its design and implementation, this study could improve the early management of trauma patients in participating hospitals by providing a structured framework for assessment and treatment.

**Contact:**  
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