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Penetrating Cardiac Injuries

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Abstract: Objectives: To present our experience of penetrating cardiac injuries treated at Atatürk University hospital; in 17 years 38 patients were analyzed. Methods: Patients were classified into three groups: group A (stable), 12; group B (shock), 21; and group C (agonal), five. Five patients were treated by pericardial window and three by pericardiocentesis. Two patients in group C, 19 patients in group B and five patients in group A underwent median sternotomy or thoracotomy in the operating room. Emergency room thoracotomies were performed in four patients. Results: There were 12 patients in group A, of which 11 survived (92 %). Of the 21 patients who were in group B on admission, 19 survived, a survival rate of 90 %. There were five patients in group C, of which three survived (60 %). Four patients required emergency room thoracotomy, of which two survived (a survival rate of 50 %), whereas 26 patients underwent operating room thoracotomy or sternotomy, all of which survived (a survival rate of 100 %). Conclusions: Cardiac injury can lead to a life-threatening hemodynamic instability that mandates prompt and clear diagnostic and therapeutic approaches. In agonal patients, and in patients transported late to the hospital, it may be necessary to begin emergency room thoracotomy or emergency room sternotomy.

Key Words: Emergency treatment, Heart injuries, Cardiac tamponade

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