

# The Severity of maxillofacial trauma in Southern Vietnam: a clinical evaluation of the MFISS and FISS.

No registrations found.

<b>Ethical review</b>	Not applicable
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON21517

### Source

NTR

### Brief title

N/A

### Health condition

1. Maxillofacial trauma;
2. neck injury;
3. brain injury;
4. associated injuries.

## Sponsors and support

### Primary sponsor: L. Dubois

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## Intervention

## Outcome measures

### Primary outcome

In this epidemiologic study a cohort of patients with MFT transferred and/or referred to the National Hospital of Odonto-Stomatology Ho Chi Minh City (NHOS-HCMC), Vietnam, was analyzed following the MFISS and FISS protocol. This study will give a description of the current situation in Vietnam concerning maxillofacial trauma. The MFISS and FISS are proportionally compared to each other. The MFISS will probably give a more clear representation regarding the extent of the maxillofacial trauma and a greater predictive value regarding the time of the healing process.

### Secondary outcome

Another aim is to evaluate the effects of non-helmet usage on traumatic brain injury, neck injury and severity of facial injury among injured motorcyclists using the AIS-90 (head and neck, face), MFISS and FISS scores. This data is compared with data of maxillofacial trauma in helmeted motorcyclist retrieved from trauma centers situated in HCMC (if possible), Amsterdam (AMC and VUmc) and literature.

## Study description

### Background summary

Road traffic injuries contribute significantly to mortality and the burden of disease throughout the world, but particularly in development countries. In many developing countries, the majority of those injured in road traffic accidents are pedestrians, cyclists and motorized two-wheel riders.

Maxillofacial trauma forms a considerable part in the overall injuries in traffic accidents. In order to assess injury severity and its probable outcome, various trauma scoring systems have been developed over the past decades. The Abbreviated Injury Scale (AIS) became the groundwork of subsequent scoring standards. In two studies conducted separately by Zhang et al and Bagheri et al two new injury severity score systems, the Maxillofacial Injury Severity Score (MFISS) and the Facial Injury Severity Scale (FISS), were developed to evaluate the characteristics of injury from maxillofacial trauma.

The aim of this clinical study is an analysis of maxillofacial injuries transferred and/or referred to the Institute of Odonto-Stomatology HCMC, Vietnam. The MFISS and FISS are evaluated in

a clinical setting and compared with each other.

## **Study objective**

In this epidemiologic study a cohort of patients with MFT transferred and/or referred to the National Hospital of Odonto-Stomatology Ho Chi Minh City (NHOS-HCMC), Vietnam, was analyzed following the MFISS and FISS protocol. This study will give a description of the current situation in Vietnam concerning maxillofacial trauma. The MFISS and FISS are proportionally compared to each other. The MFISS will probably give a more clear representation regarding the extent of the maxillofacial trauma and a greater predictive value regarding the time of the healing process.

## **Study design**

N/A

## **Intervention**

Measuring parameters:

1. Sex;
2. AIS-90 (head and neck, face);
3. ISS;
4. MFISS and FISS;
5. Intubation criteria (A,B,C,D problem);
6. Neck injury;
7. Brain injury;
8. Associated injuries;
9. Helmeted;
10. Helmet-type;
11. Driving speed during accident;
12. Type of accident;
13. Road type;

14. Weather;
15. Duration of hospital stay;
16. Days on ICU.

## Contacts

### Public

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## Eligibility criteria

### Inclusion criteria

All patients with maxillofacial injuries transferred and/or referred to the NHOS-HCMC, Vietnam. This hospital is mainly responsible for treatment of the maxillofacial trauma patients in Southern Vietnam.

### Exclusion criteria

N/A

## Study design

### Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	20-09-2006
Enrollment:	1500
Type:	Actual

## Ethics review

Not applicable	
Application type:	Not applicable

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
NTR-new	NL721
NTR-old	NTR731
Other	: N/A
ISRCTN	ISRCTN wordt niet meer aangevraagd.

## Study results

### Summary results

N/A