

21 - PROFILE OF PATIENTS VICTIMS OF THORACIC TRAUMA OF A UNIVERSITY HOSPITAL OF THE WEST OF PARANÁ

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INTRODUCTION

According to the World Health Organization (WHO), in recent years, trauma has been increasing its incidence and is regarded as the disease of the century and is most often neglected by society. Most young people of productive age (occupying the third place in causes of death in Brazil, and in some states being even more relevant, leading to incapacity of those affected and even death), constitute one of the main health problems in many countries (ABREU, et al 2015).

One of the most common traumas is that of the thorax, according to Souza, Santos and Pereira (2013), corresponding to 25% of the deaths in traumas, mostly affecting young individuals of productive age and males. Most of them are caused by external causes, such as: car accidents, falls, aggressions, injuries with firearms and other factors, this is due to the high technologies implanted in means of transportation, recklessness and an increase in urban violence.

Chest trauma is usually characterized as open or closed, leading to changes in respiratory and circulatory dynamics (SOUZA, SANTOS, PEREIRA, 2013). For Junior, Taline and Neto (2014), it can present only superficial and visible lesions, or even life-threatening injuries such as: airway obstruction, open pneumothorax, massive hemothorax, unstable chest, hemopneumothorax, pleural effusion, among others.

As treatment for the traumatized is the pleural drainage that in most cases is sufficient to reverse the result of the trauma. It is a technique that allows the removal of liquid, gas, purulent or bloody contents from the interior of the pleural cavity or the mediastinum. In most cases, there is great success with this type of approach, which aims to reestablish negative pressure in the pleural space favoring the normalization of chest pressures, improving pulmonary saturation, decreasing risks of atelectasis and improving pulmonary reexpansion. For more complex patients, a thoracotomy is required (JUNIOR, TALINE and NETO, 2014).

For Souza, Santos and Pereira, (2013), the best solution to trauma is prevention, so raising awareness of the most susceptible population is of paramount importance. This work aims to contribute to the literature in order to demonstrate the most relevant variables in relation to thoracic trauma.

The objective of this study was to characterize the profile of patients who were victims of chest trauma who were admitted to the emergency room of a University Hospital of the West of Paraná.

METHODOLOGY

It is a basic research, of a descriptive and retrospective character. The sample was collected as a medical record from February 2016 to May 2017 as an inclusive study - patients admitted to the emergency room of a University Hospital of the West of Paraná with thoracic trauma, and excluded patients who achieved evolve well with conservative treatment, without the need for any kind of approach.

The study was developed according to established ethical standards and began after the approval of the Research Ethics Committee with Human Beings. The data were collected from the patients' charts, the following items were evaluated: age, sex, hospitalization days, trauma evolution, external cause, type of traumatic thorax (pneumothorax, hemothorax, hemopneumothorax, pulmonary contusion), side affected by trauma, mechanical ventilation (if necessary) and physiotherapeutic care.

STATISTICAL ANALYSIS

The data collected were analyzed by means of descriptive and inferential statistics, stored in a database in the Microsoft Excel® 2007 program. Subsequently, the data were exported to the R program (R Core Team, 2017), with an absolute and relative frequency analysis of variables. To test the association between the affected hemithorax and type of chest trauma, the Chi-square test of the same program was used. For the variables hospitalization days, mechanical ventilation and physical therapy, the data were analyzed for the normality of the residues by the Shapiro-Wilk test and later analysis of the variance using the Kruskal-Wallis test using the ExpDes.pt package of the program R.

RESULTS

Ninety-three medical records were evaluated, of which 12 (12.9%) were female and 81 (87.1%) were male, with a mean age of 34.3 ± 14.7 years. The reasons for hospitalization for chest trauma were in the majority of cases due to automobile accident (58.1%), followed by firearm injury (17.2%), white gun injury (16.1%) and falls (8.6%).

There was an average hospitalization of 14.79 ± 14.1 days, however, most of the patients remained hospitalized for up to 20 days (76.3%), 11.8% between 21 and 40 days, 10.7% between 41 and 60 days, and only 1.1% between 61 and 80 days. The months that presented the greatest number of hospitalizations comprised the period from January to May 2017 (46.2%), from May to August 2016 and September and December of the same year there was a percentage of 26.8% of admissions. Thoracic trauma presented a good prognosis, with a high rate in 76.3% of cases and transfer in 8.6% of cases. The death rate was 13.9% and there was 1.1% of hospital evasion. These data are shown in table 1.

Table 1. Characterization of the sample of patients attending the emergency room of a university hospital victims of thoracic trauma.

	Categories	Nº	%
Sex	Female	12	12.9
	Male	81	87.1
Age	0 a 20	17	18.2
	21 a 40	42	45.1
	41 a 60	30	32.2
	61 a 80	4	4.3

Reason for hospitalization	White Gun Injury	15	16.1
	Firearm Injury	16	17.2
	Falls	8	8.6
	Automobile accident	54	58.1
Days of hospitalization	1 a 20	71	76.3
	21 a 40	11	11.8
	41 a 60	10	10.7
	61 a 80	1	1.1
Period of hospitalization	May to August /2016	25	26.8
	October to December/2016	25	26.8
	January to May /2017	43	46.2
Evolution of trauma	High	71	76.3
	Transfer	8	8.6
	Evasion	1	1.1
	Death	13	13.9

Legend: Values expressed in number (n) and percentage (%).

The following types of traumatic thorax were seen: hemothorax (25.8%), pneumothorax (23.6%), pulmonary contusion (21.5%), hemopneumothorax (16.1%) and pleural effusion (4.3%). With a lesser occurrence, there was an association of two traumas such as pneumothorax with hemopneumothorax (2.1%), pulmonary contusion with hemothorax and pulmonary contusion with pneumothorax in 2.1% of cases and pulmonary contusion with pleural effusion and pulmonary contusion with hemopneumothorax in 1.1% of cases. There was no predominance of incidence in a hemithorax, with cases involving the right hemithorax in 25.8% of the cases, the left one in 36.5%, and bilaterally in 37.6%, as shown in table 2. Using the chi-square test, ($\chi^2 = 2.38$, $df = 2$, $p = 0.3$). There was no association between the number of cases with the affected hemithorax ($\chi^2 = 2.38$, $df = 2$, $p = 0.3$).

Table 2: Profile of the types of traumatic thorax and hemithorax affected in patients suffering from thoracic trauma hospitalized in a university hospital.

	Categoria	Nº	%
Traumatic chest type	Hemothorax	24	25.8
	Pneumothorax	22	23.6
	Pulmonary contusion	20	21.5
	Hemopneumothorax	15	16.1
	Pleural effusion	4	4.3
	Pneumothorax + Hemopneumothorax	2	2.1
	Pulmonary contusion + Hemothorax	2	2.1
	Pulmonary contusion + Pneumothorax	2	2.1
	Pulmonary contusion + Pleural effusion	1	1.1
	Pulmonarycontusion+Hemopneumothorax	1	1.1
Hemitorax affected	Right	24	25.8
	Left	34	36.5
	Bilateral	35	37.6

Legend: Values expressed in number (n), percentage (%).

In relation to the days of hospitalization ($\chi^2 = 2.58$, $df = 5$, $p = 0.76$), days of mechanical ventilation ($\chi^2 = 3.65$, $df = 5$, $p = 0.5$) and days of physiotherapeutic care ($\chi^2 = 1.17$, $df = 5$, $p = 0.94$) there was no significant difference in the number of days with the type of chest trauma, shown in table 3.

Table 3 – Median and interquartile range of days of hospitalization, mechanical ventilation and physiotherapeutic care in patients with thoracic trauma in a university hospital.

Type of thoracic trauma	Days of hospitalization	Days of ventilation	Physiotherapeutic care days
Pulmonary contusion	11.5 (I: 3.2 – 22)	2 (I: 0.5 – 11)	11 (I: 0 – 37)
Hemothorax	13 (I: 7.2 – 20) 9.5 (I: 5 – 20)	2 (I: 0 – 7.2) 1.5 (I: 0 – 6.7)	13 (I: 2.5 – 28) 6 (I: 1.2 – 34)
Pneumothorax	7.5 (I: 4 – 12.5)	1 (I: 0.7 – 4)	5 (I: 2.7 – 12.2)
Hemopneumothorax	9.5 (I: 7.2 – 21.2)	1.5 (I: 0 – 6.7)	5.5 (I: 3 – 21.7)
Pleural effusion	8 (I: 5 – 9.5)	0 (I: 0 – 1)	6 (I: 5.5 – 8.5)

Legend: data expressed in median (interquartile range).

DISCUSSION

In the present study, the majority of patients admitted to the emergency room, victims of chest trauma, were males (87.1%), which corroborates with the literature, being young and productive age individuals (21 to 40 years, 34.3 ± 14.7). For Westphal et al. (2009), this is due to the high rate of urban violence that affects mainly young male subjects. He points out that this data is also mentioned by developing countries as in Cuba, with 54.5% of victims in this age group.

As to the reason for admission, car accidents were more prevalent (58.1%). The development of the population and more advanced technologies, in addition to a faster pace of daily life, may have induced this to be the most occurring, agreeing with the study of Junior, Talini, Neto, (2014), also carried out in the southern region from the country. Westphal et al. (2009) analyzed thoracic trauma in the northern region of Brazil, where the highest incidence was white-arm wounds, which also appeared in a smaller percentage in this study, inferring that for each region of the country, there is a predominance different from mechanism to trauma, stating in any way that chest trauma is correlated with external factors, which according to the WHO is a major public health problem in Brazil.

The period from January to May was the one that most pointed chest trauma (46.2%), January being the month of greatest occurrence, since it is a month more prone to vacations and trips, being consonant with the reason for hospitalization more found.

The mortality rate of hospitalized patients was 13.8%, lower than in a study performed by Souza et al. (2015), which was 17.8%, and higher than in other studies conducted in other regions, where did not exceed 10%, these divergences appear due to different geographic areas analyzed and also by the hospital in question to be a reference in trauma. The polytrauma patients received in the emergency room are usually unstable and have associated injuries and not purely in the chest. Souza, Santos and Pereira, (2013) cite that thoracic injuries associated to other organs, are very relevant in relation to deaths, occupying a prominent place. On the other hand, the majority of those attended had a good prognosis, where 74.2% were discharged.

Melo, Moreira, Marchiori, (2003) analyzed the pleural space in computed tomography in trauma patients, found hemothorax as the most frequent in 48% of cases, followed by pneumothorax in 40.6%, corroborating with the data found, where the highest prevalence was hemothorax ($n = 24$, 25.8%), followed by pneumothorax ($n = 22$, 23.6%) and pulmonary contusion ($n = 20$, 21.5%). Diverging from the data found, Junior, Taline and Neto, (2014) found hemopneumothorax (56.12%) as the most common traumatic thorax. Not being statistically relevant, due to the fact that it is automatically related to external factors, not having a certain dominance, indicating that the thorax found is directly related to injury, to the trauma mechanism, among others,

also explaining the non-significance of the most affected side.

Regarding the type of traumatic thorax, days of hospitalization, days of mechanical ventilation and number of physiotherapeutic appointments, there was no significant difference between them, since each event and each type of traumatic thorax responds in a way, without a fixed intervention, leading to in consideration of the patient's clinic and that each organism responds in a way. Disagreeing with the study by Nobrega, Pereira and Costa (2012), who analyzed 393 records and observed a significant relationship between days of hospitalization and physical therapy, being a variable directly related to another, it is considered that respiratory physiotherapy is qualified to treat / recover and even prevent respiratory diseases, but there is no protocol to be followed, it is up to the professional to name the best technique to be used. Costa, et al., 2015, reports that patients with traumatic thorax who require drainage can benefit from hospital physiotherapy with decreased dyspnea and improved functional capacity.

CONCLUSION

It was possible to analyze the profile of patients suffering from chest trauma and is the same as that found in other regions of the country, being young men of productive age, being the most influential automobile accident variable, and hemothorax the most traumatic thorax, presenting a survival of these traumatized.

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PROFILE OF PATIENTS VICTIMS OF THORACIC TRAUMA OF A UNIVERSITY HOSPITAL OF THE WEST OF PARANÁ

ABSTRACT

Introduction: According to the World Health Organization, trauma has been increasing its incidence and is regarded as the disease of the century. It reaches mostly young individuals of productive age. One of the most common traumas is that of the chest, corresponding to 25% of the deaths. Caused mostly by external causes. Leading to changes in respiratory and circulatory dynamics. Featuring lesions only superficial and visible, or even life-threatening. Objective: To characterize the profile of the victims of thoracic trauma who were admitted to the emergency room of a University Hospital of the West of Paraná. Methodology: This is a descriptive and retrospective research. The sample was collected in the form of a medical records survey, from February / 2016 to May / 2017, as an inclusive study, patients admitted to the emergency room of the Hospital Universitário do Oeste do Paraná, with thoracic trauma. Results: Analyzed 93 patients, being 87.1% male, corresponding to the majority of the sample, with a mean age of 34.3 years. The reasons for hospitalization were automobile accidents, followed by gunshot wounds, white arms and falls. There was an average hospitalization of 14.79 days. The months with the greatest number of hospitalizations comprised the period from January to May. Thoracic trauma presented good prognosis, with a high of 76.3%. The types of traumatic thorax treated were hemothorax, pneumothorax, pulmonary contusion, hemopneumothorax and pleural effusion. We analyzed the variables hospitalization days, mechanical ventilation days and days of physiotherapeutic care, there

was no significant difference in the number of days with the type of thoracic trauma. Conclusion: the profile of patients suffering from chest trauma corroborates those found in other regions of the country, with young men of productive age, being the most influential variable automobile accidents and hemothorax the most traumatic thorax, presenting a satisfactory survival.

Key words: thoracic trauma, drainage, epidemiology

PROFIL DES PATIENTS VICTIMES DE TRAUMA THORACIQUE D'UN HÔPITAL UNIVERSITAIRE DE L'OUEST DE PARANÁ

ABSTRAIT

Introduction: Selon l'Organisation mondiale de la santé, le traumatisme a augmenté son incidence et est considéré comme la maladie du siècle. Il atteint principalement les jeunes individus d'âge productif. L'un des traumatismes les plus courants est celui de la poitrine, correspondant à 25% des décès. Causé principalement par des causes externes. Conduisant à des changements dans la dynamique respiratoire et circulatoire. Avec des lésions seulement superficielles et visibles, voire mortelles. Objectif: Caractériser le profil des victimes du traumatisme thoracique qui ont été admises à la salle d'urgence d'un hôpital universitaire de l'ouest du Paraná. Méthodologie: C'est une recherche descriptive et rétrospective. L'échantillon a été recueilli sous la forme d'une enquête sur les dossiers médicaux, de février 2016 à mai 2017, dans le cadre d'une étude inclusive, des patients admis à la salle d'urgence de l'hôpital universitaire de Paraná, avec un traumatisme thoracique. Résultats: Analyse de 93 patients, soit 87,1% d'hommes, correspondant à la majorité de l'échantillon, avec un âge moyen de 34,3 ans. Les raisons de l'hospitalisation étaient les accidents d'automobile, suivis des blessures par balle, des bras blancs et des chutes. Il y avait une hospitalisation moyenne de 14,79 jours. Les mois avec le plus grand nombre d'hospitalisations comprenaient la période de janvier à mai. Le traumatisme thoracique a présenté un bon pronostic, avec un taux élevé de 76,3%. Les types de thorax traumatique traités étaient l'hémithorax, le pneumothorax, la contusion pulmonaire, l'hémopneumothorax et l'épanchement pleural. Nous avons analysé les jours d'hospitalisation variables, les jours de ventilation mécanique et les jours de soins physiothérapeutiques, il n'y avait pas de différence significative dans le nombre de jours avec le type de traumatisme thoracique. Conclusion: le profil des patients souffrant de traumatisme thoracique corrobore ceux rencontrés dans d'autres régions du pays, les jeunes hommes en âge de procréer étant les accidents de voiture les plus influents et l'hémithorax le thorax le plus traumatisant, présentant une survie satisfaisante.

Mots-clés: traumatisme thoracique, drainage, épidémiologie

PERFIL DE LOS PACIENTES VÍCTIMAS DE TRAUMA TORÁCICO DE UN HOSPITAL UNIVERSITARIO DEL OESTE DEL PARANÁ

RESUMEN

Introducción: Según la Organización Mundial de la Salud, el trauma viene aumentando su incidencia y se considera como la enfermedad del siglo. Alcanza en su mayoría a individuos jóvenes, en edad productiva. Uno de los traumas más comunes es el de tórax, correspondiendo al 25% de las muertes. Ocasionados en su mayor parte, por causas externas. Llevando a los cambios de la dinámica respiratoria y circulatoria. Presentando lesiones sólo superficiales y visibles, o hasta que imponen riesgos la vida. Objetivo: Caracterizar el perfil de los pacientes víctimas de trauma torácico que dieron entrada en la sala de emergencia de un Hospital Universitario del Oeste de Paraná. Metodología: Se trata de una investigación de carácter descriptivo y retrospectivo. La muestra fue recolectada en forma de levantamiento de prontuarios, entre febrero / 2016 a mayo / 2017, como carácter inclusivo, pacientes que ingresaron en la sala de emergencia del Hospital Universitario del Oeste de Paraná, con trauma torácico. Resultados: Analizados 93 pacientes, siendo 87,1% del sexo masculino, correspondiendo la mayoría de la muestra, con edad media de 34,3 años. Los motivos de internamiento encontrados fueron accidentes automovilísticos, seguido de heridas de arma de fuego, arma blanca y caídas. Hubo una media de internamiento de 14.79 días. Los meses con mayor número de internaciones comprendieron el período de enero a mayo. Los traumas torácicos presentaron un buen pronóstico, con un alza en el 76.3%. Los tipos de tórax traumáticos atendidos, fueron hemotórax, neumotórax, contusión pulmonar, hemopneumotórax y derrame pleural. Se analizaron las variables días de internamiento, días de ventilación mecánica y días de atención fisioterapéutica, no hubo diferencia significativa la cantidad de días con el tipo de trauma torácico. Conclusión: el perfil de los pacientes víctimas de trauma torácico corrobora con los encontrados en otras regiones del país, siendo hombres jóvenes, en edad productiva, siendo la variable más influyente accidentes automovilísticos y hemotórax el tórax traumático más hallado, presentando una sobrevida satisfactoria.

Palabras clave: trauma torácico, drenaje, epidemiología

PERFIL DOS PACIENTES VÍTIMAS DE TRAUMA TORÁCICO DE UM HOSPITAL UNIVERSITÁRIO DO OESTE DO PARANÁ

RESUMO

Introdução: Segundo a Organização Mundial de Saúde, o trauma vem aumentando sua incidência e é considerado como a doença do século. Atinge em sua maioria indivíduos jovens, em idade produtiva. Um dos traumas mais comuns é o de tórax, correspondendo a 25% dos óbitos. Ocasionados em sua maior parte, por causas externas. Levando à alterações da dinâmica respiratória e circulatória. Apresentando lesões apenas superficiais e visíveis, ou até que imponham riscos a vida. Objetivo: Caracterizar o perfil dos pacientes vítimas de trauma torácico que deram entrada na sala de emergência de um Hospital Universitário do Oeste do Paraná. Metodologia: Trata-se de uma pesquisa de caráter descritivo e retrospectivo. A amostra foi coletada em forma de levantamento de prontuários, entre fevereiro/2016 à maio /2017, como caráter inclusivo, pacientes que deram entrada na sala de emergência do Hospital Universitário do Oeste do Paraná, com trauma torácico. Resultados: Analisados 93 paciente, sendo 87,1% do sexo masculino, correspondendo a maioria da amostra, com idade média de 34,3 anos. Os motivos de internamento encontrados foram acidente automobilístico, seguido de ferimento de arma de fogo, arma branca e quedas. Houve uma média de internamento de 14.79 dias. Os meses com maior número de internações compreenderam o período de janeiro à maio. Os traumas torácicos apresentaram bom prognóstico, com alta em 76.3%. Os tipos de tórax traumáticos atendidos, foram hemotórax, pneumotórax, contusão pulmonar, hemopneumotórax e derrame pleural. Analisados as variáveis dias de internamento, dias de ventilação mecânica e dias de atendimento fisioterápico, não houve diferença significativa a quantidade de dias com o tipo de trauma torácico. Conclusão: o perfil dos pacientes vítimas de trauma torácico corrobora com os encontrados em demais regiões do país, sendo homens jovens, em idade produtiva, sendo a variável mais influente acidentes automobilísticos e hemotórax o tórax traumático mais achado, apresentando uma sobrevida satisfatória.

Palavras-chave: trauma torácico, drenagem, epidemiologia