

# **AUSTRALIAN RESUSCITATION COUNCIL**

# **GUIDELINE 9.1.5**

# HARNESS SUSPENSION TRAUMA – FIRST AID MANAGEMENT

## **INTRODUCTION**

Suspension trauma, or orthostatic shock, has been reported to affect victims who are suspended within a body harness for a prolonged period of time (5 to 30 minutes).<sup>1,2</sup> It presents with the development of a range of symptoms which may result in unconsciousness or death, and is thought to occur as a result of low blood pressure secondary to blood pooling in the legs, pelvis and abdomen of victims who are suspended and motionless.

## **RECOGNITION**

The signs and symptoms of suspension trauma are the same to those of shock. Suspension trauma should be considered where the victim has been suspended by a harness for a prolonged period, and are exhibiting any of the following:<sup>3</sup>

- faintness
- breathlessness
- sweating
- paleness
- nausea
- dizziness
- low blood pressure
- unconsciousness

#### **MANAGEMENT**

- Call for an ambulance (Dial Triple Zero 000)
- If unconscious, manage as per ARC Basic Life Support flow chart (Guideline 8)
- Rest the conscious victim in a position of comfort, ideally lying down, and provide reassurance
- Loosen or remove harness
- Administer oxygen if available
- Look for and manage associated injuries in all victims, but particularly victims who may have fallen or been electrocuted.
- Monitor the signs of life at frequent intervals

Some agencies recommend that rescuers maintain victims in a sitting position and avoid lying them flat for 30 minutes. There is <u>no evidence</u> to support this practice as a treatment of suspension trauma and it may be harmful. Care of the airway takes precedence over any injury.

## **LEVEL OF EVIDENCE**

Consensus Expert Opinion

## **CLASS OF RECOMMENDATION**

Class A - Recommended

#### **REFERENCE**

- 1. Turner N.L., Wassell J.T., Whisler R., Zwiener J. Suspension tolerance in a full-body safety harness, and a prototype harness accessory. [Evaluation Studies. Journal Article] Journal of Occupational & Environmental Hygiene. 5(4):227-31, 2008.
- 2. Lee C., Porter K.M. Suspension trauma. [Journal Article. Review. Emergency Medicine Journal. **24**(4):237-8, 2007.
- 3. Adish A., Robinson L., Codling A., Harris-Roberts J., Lee C., Porter K. Evidence based review of the current guidance on first aid measures for suspension trauma. Health and Safety Executive. Research Report RR708. May 2009. http://www.hse.gov.uk/research/rrpdf/rr708.pdf

# **FURTHER READING**

ARC Guideline 3 Unconsciousness

ARC Guideline 4 Airway

ARC Guideline 8 Cardiopulmonary Resuscitation

ARC Guideline 9.1.6 Management of Suspected Spinal Injury

ARC Guideline 9.2.3 Shock