



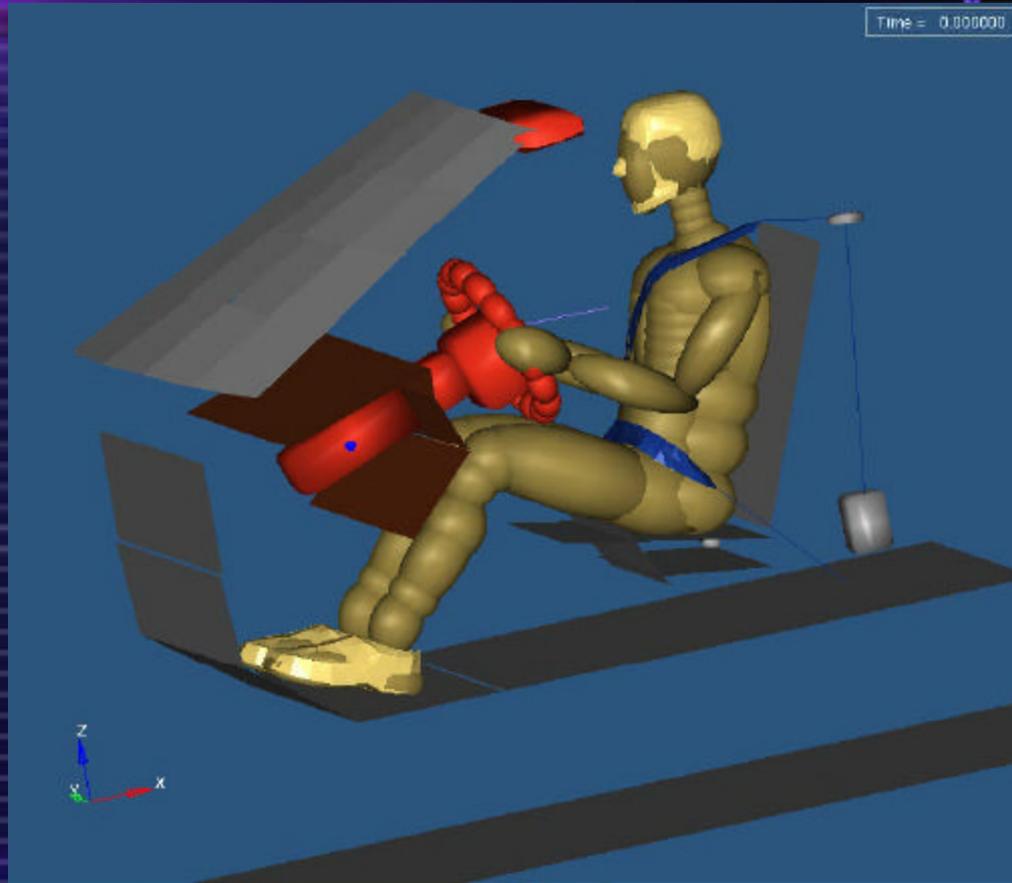
# Crash, Vehicle and Restraint Factors and Their Influence on Thoracic Injury Patterns

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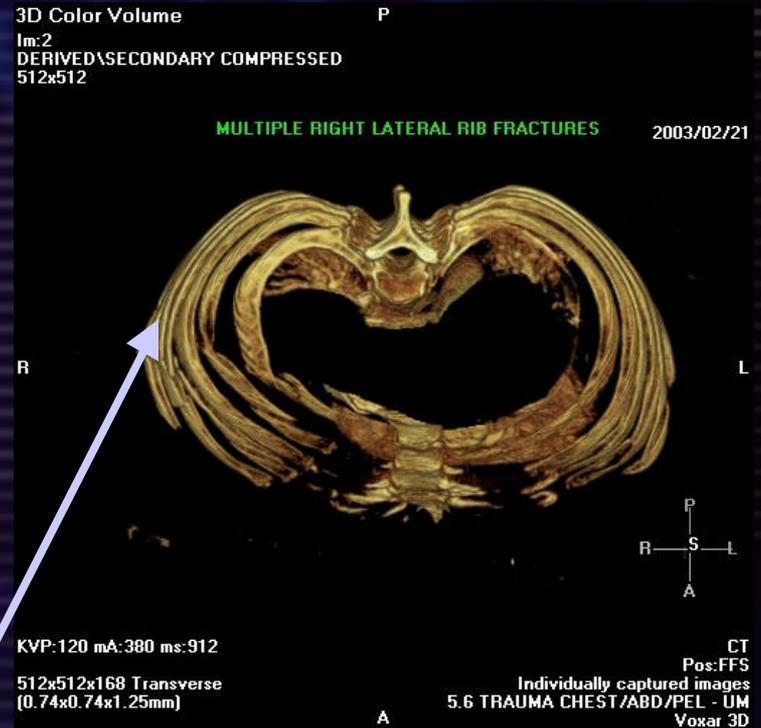
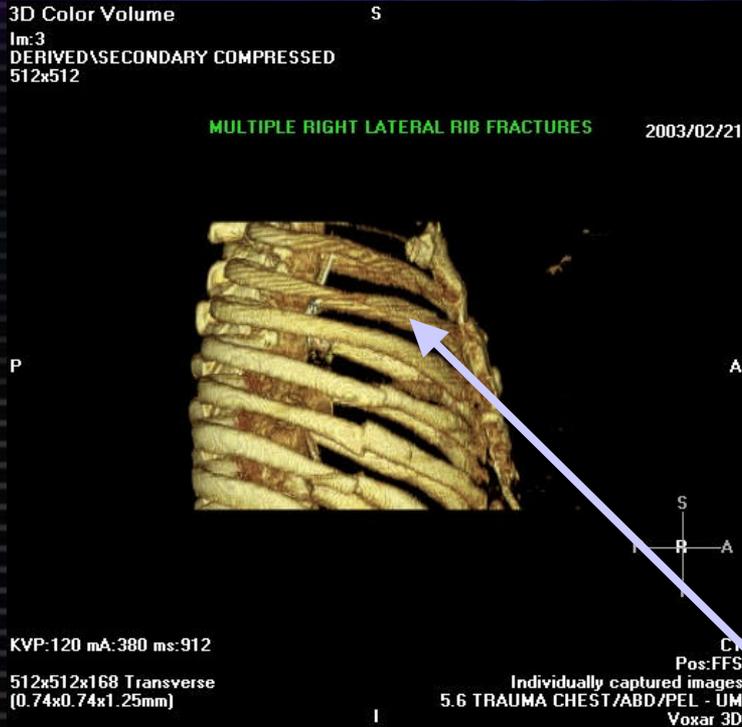
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# Model of Driver in a Crash





# 3-D CAT Scan

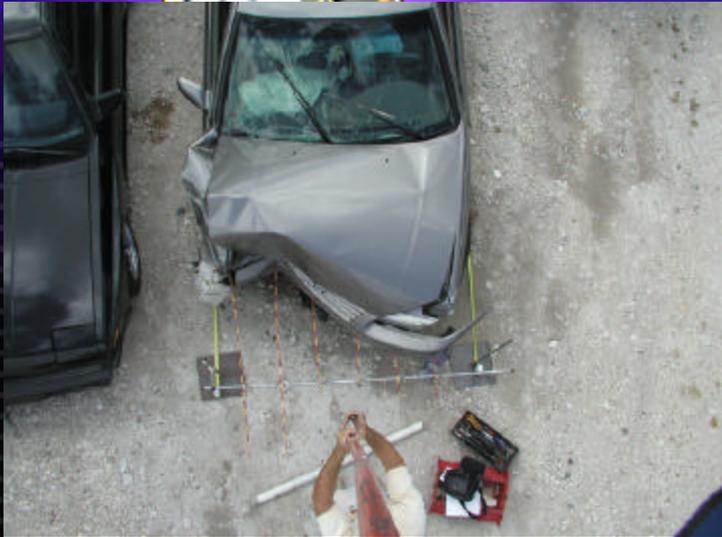


## Rib Fractures





# Example Case- 60 YO Occupant



- 21.1 MPH Frontal DV
- Semi- Narrow Object Impact
- 24" Max Crush

- (2) Low Severity Lateral Crashes followed by significant frontal
- Offset Frontal Crash into Concrete Pole



# Example Case- Elderly Occupant



- Injuries Sustained
  - AIS 5 Rib Fx. (belt)
  - AIS 4 Splenic Lac. (belt)
  - AIS 3 Diaphragm Lac. (belt)
  - AIS 2 Sternum Fx. (belt)
- Possible Poor Belt Placement
- 4 days hospitalization
- Fatally Injured Occupant



# Example Case- Case Significance



- Decreased injury tolerance for elderly female leads to rib fracture and fatality
- Injuries sustained by elderly introduce increased risk of fatality and prolonged recovery period
- Lung contusions/lacerations introduce respiratory complications



# Basis for Injury Tolerance Criteria for Dummies

- Chest injury tolerance is based largely on cadaver tests
- Rib fractures are the most consistent injury measurements
- Resulting regulatory criteria for 50% male:
  - 60g on chest for longer than 3 ms.
  - 50 mm of chest deflection at chest center
- New generation dummies (Thor and EuroThor) can measure chest deflection in multiple locations –
- Predict soft tissue injuries?



# Purpose

- Application of CIREN data to understand real world injury patterns for young and elderly
- Are cadaver rib fracture patterns like crash victims?
- Do cadaver rib fractures correlate to chest soft tissue injuries?
- How do injury patterns change with age and type of restraint?



# Outline of Presentation

- Cadaver test results
- NASS data for elderly chest injuries
- CIREN data for elderly chest injuries
- CIREN rib fracture patterns vs. cadavers
- Summary & Conclusions



# Injury Tolerance for Elderly, Based on Cadaver Tests

- Zhou, Rouhana et. al. 1996 proposed that tolerance to thoracic injury decreases with age in 3 categories (15-30, 30-65, 65+ yrs)
- Injury risks based on cadaver test results
- Study concluded that injury tolerance decreases by 20% for blunt loading and up to 70% for concentrated belt-loading for elderly population (65+)



# NHTSA Cadaver Tests

- NHTSA has sponsored numerous cadaver tests with belts, air bags, and belts+air bags.
- UVa (Crandall) 14 belt only; 15 belt + bag
- MCW (Yoganandan) belt & air bag only
- Uva and MCW tests will be the basis for comparisons to be made later



# Outline of Presentation

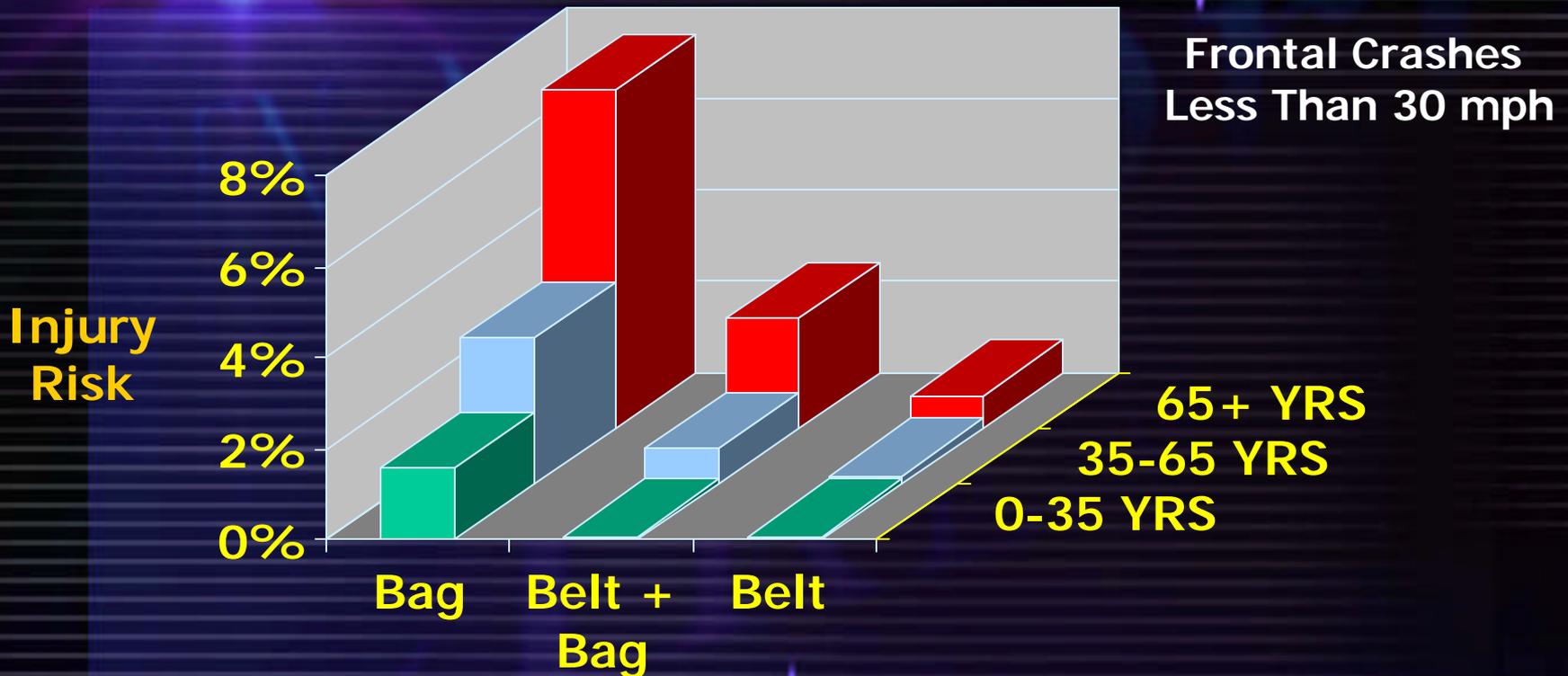
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# Data Utilized

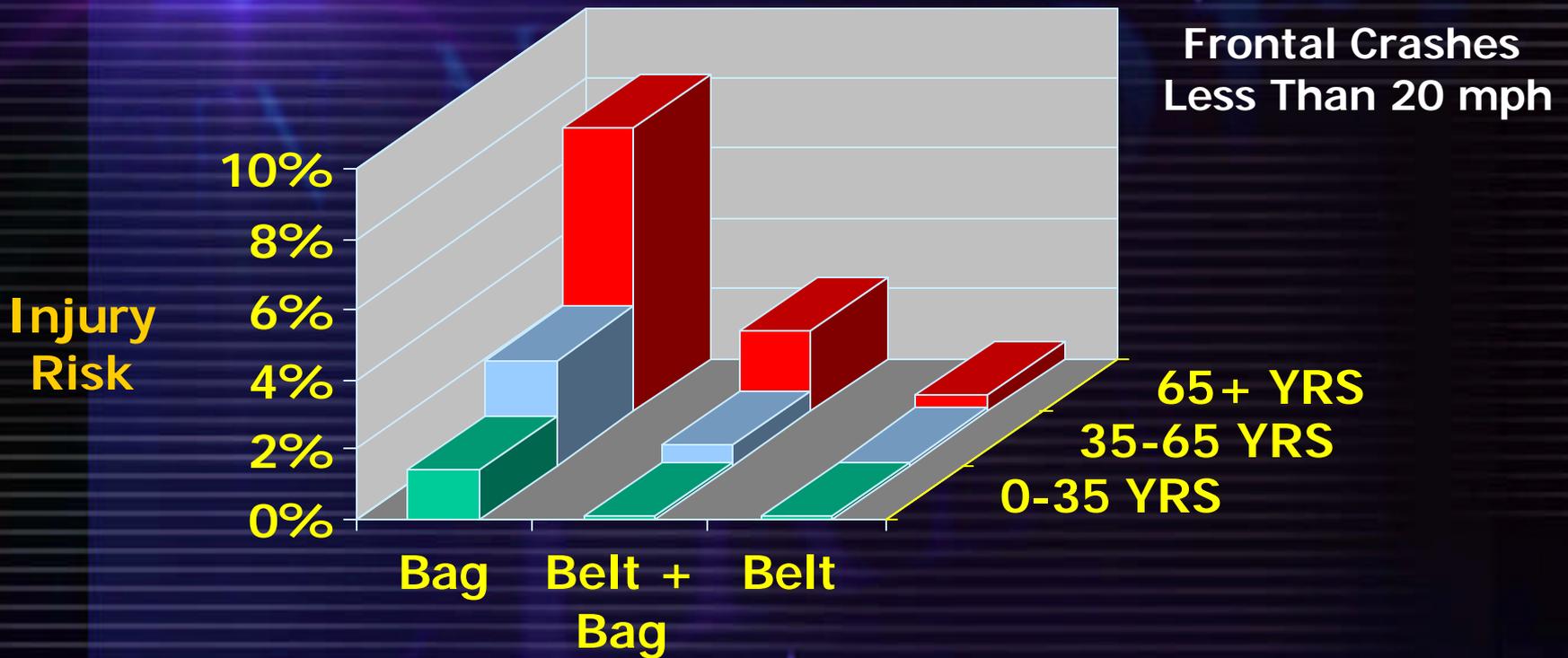


- NASS/CDS 1990-2002
- Frontal Crashes (11,12,1 o'clock or 10,2 w/frontal damage)
- Front Seat Occupants Reviewed (driver, right front passenger)
- Filtered by:
  - Restraint usage (3-point belt)
  - Occupant age category (15-65, 65+ YRS)
  - Airbag deployment at seating position

# Chest Injury Risk by Restraint and Age



# Chest Injury Risk by Restraint and Age





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# Driver Chest Injuries

## WLIRC Data



- Frontal Crashes with No Rollover
- WLIRC Cases + All Fatal Cases
- Trauma Center Patients + Fataals =  
Census of Severely Injured in South  
Florida



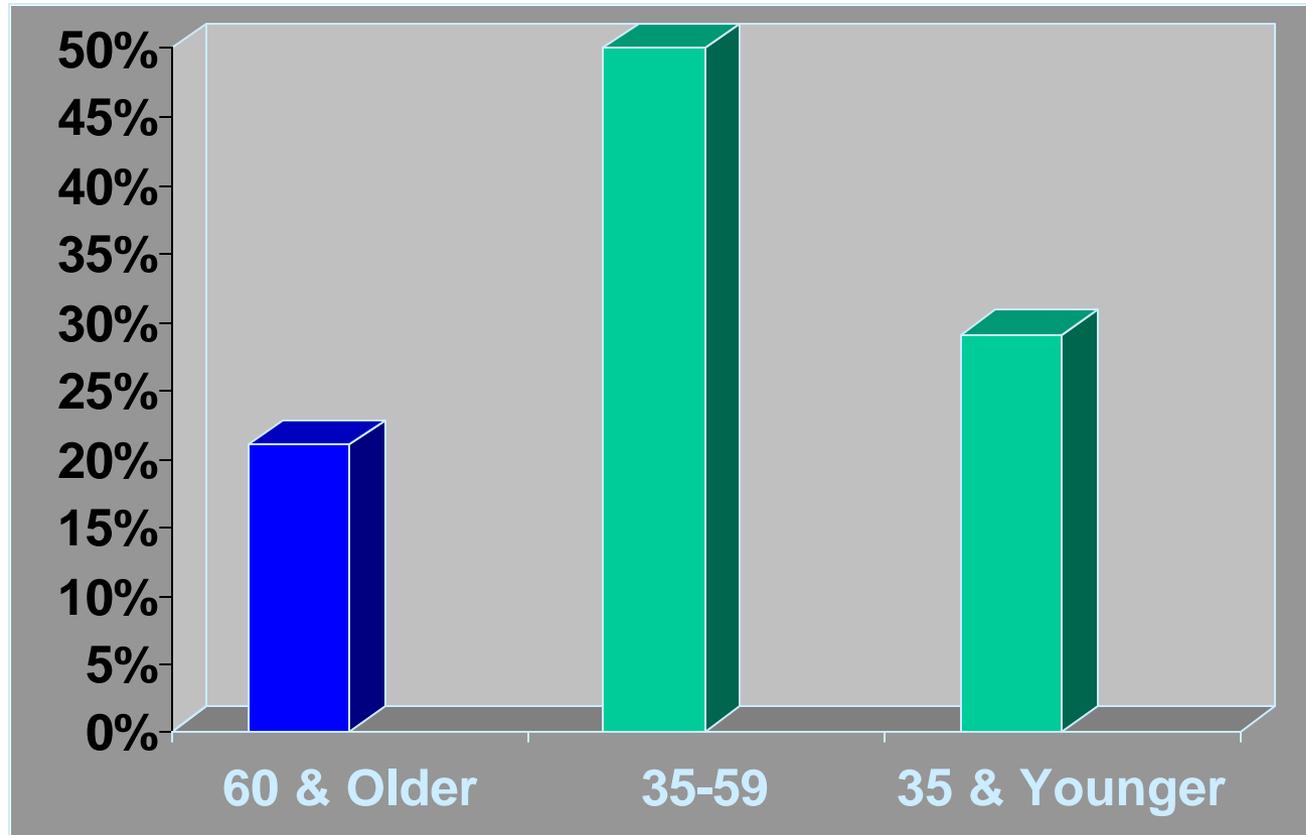
# Examination of Chest/Abdominal Injuries at WLIRC

- Belted Drivers in Frontal Crashes with AIS 3+ Chest/Abdominal Injuries - WLIRC Data
- Number in Population - 86



# Age Distribution of Belted Drivers in Frontal Crashes with AIS 3+ Chest Injuries

% Drivers with  
AIS 3+  
Chest Injuries





# HARM Factors

Injury Severity

Harm Factor

AIS 2

0.038

AIS 3

0.119

AIS 4

0.269

AIS 5

0.848

AIS 6

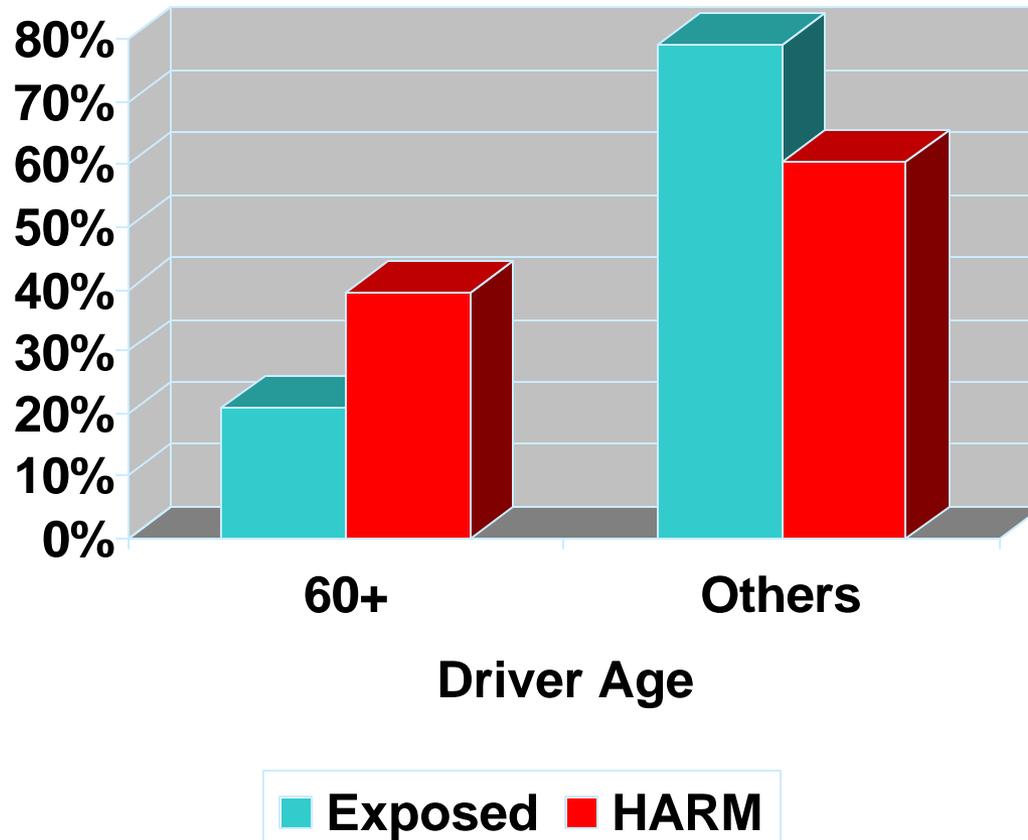
1.000

# Belted Drivers in Frontal Crashes with AIS 3+ Chest Injuries

WLIRC Data



Distribution of  
MAIS 3+ Chest  
Injuries & HARM

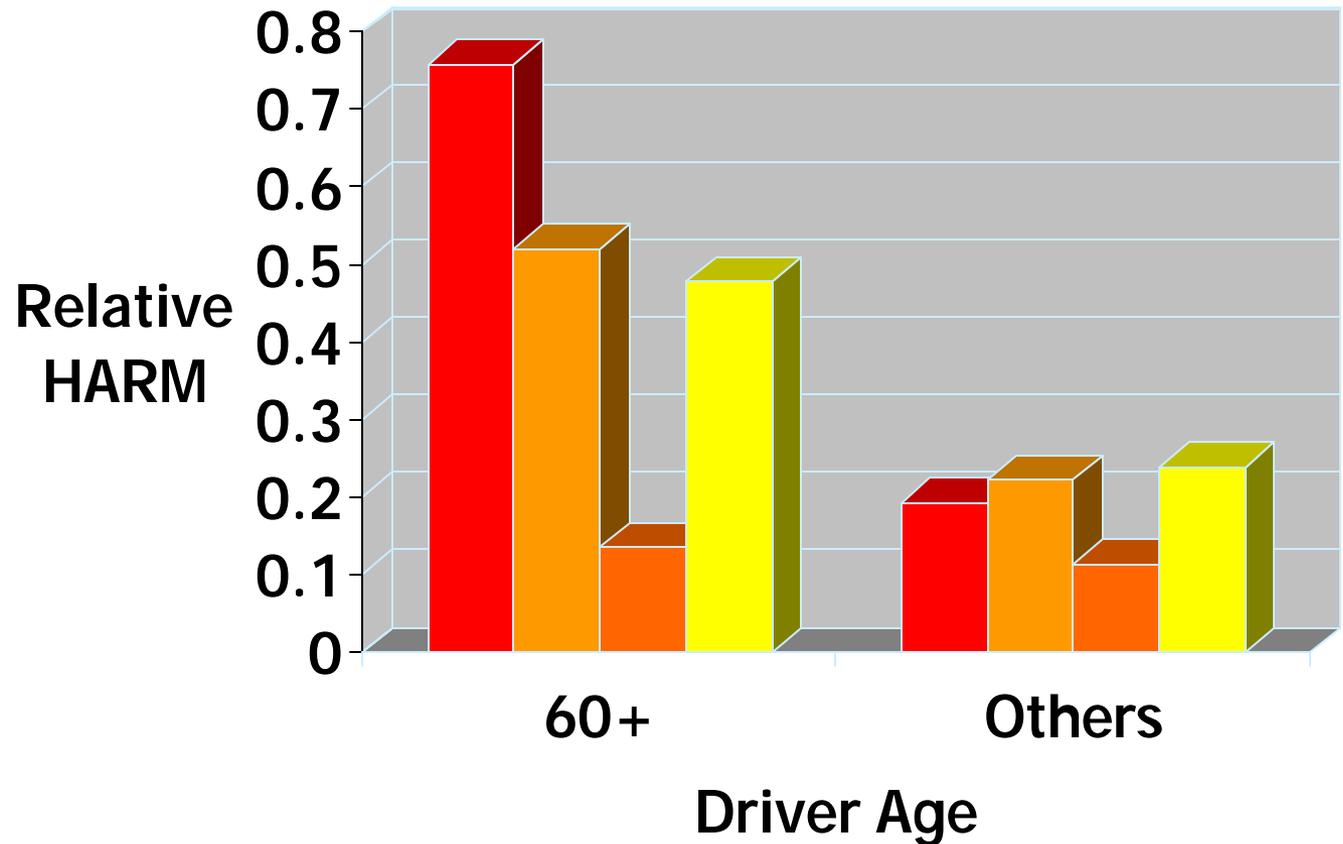


# Distribution of HARM in Population by Injured Organ



<b>Injured Organ</b>	<b>60+</b>	<b>All Others</b>
Heart/Aorta	40.2%	25.2%
Lung	7.1%	14.7%
Rib	27.5%	28.9%
Liver	9.8%	22.4%
Spleen	3.8%	4.8%
Kidney	4.8%	0.3%
Bowel	6.8%	3.6%

# Relative HARM by Driver Age (WLIRC Data)



■ Heart/Aorta ■ Rib ■ Lung ■ Other

# Observations- Chest Injuries & the Elderly



- 60+ age group are:
  - 21% of injured and
  - 40% of HARM
- Elderly have more extensive chest injuries
  - Multiple organ injuries
  - More severe individual injuries
- Heart/aortic injuries are much more common among elderly



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# UMTIR ANALYSIS



Network



# Outline of Presentation



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# Summary & Conclusions

- NASS elderly–
  - Chest injury risk more than 2 times other ages
- CIREN elderly–
  - 21% of AIS 3+ and 40% of HARM
  - Soft tissue injuries differ with age
- Fracture patterns –
  - Cadavers in 3pt belts have more bilateral fractures & higher rib fractures
  - Other differences noted



# Summary & Conclusions

- CIREN data offers the possibility to refine injury criteria