Reporting of serious road traffic injuries in Finland

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PhD, MSc Noora Airaksinen

Chief Specialist, Road safety The Finnish Transport Infrastructure Agency





Background

- A study on different criteria to define serious injury in 2012*
- The EU recommended to use the MAIS 3+ criteria in 2013.
- Current method was developed, tested and documented in 2014** when we prepared reporting serious injuries to EU in Finland. Conclusions and recommendations:
 - Healthcare data can be used to report serious injuries.
 - The ICD-AIS-map (=automatic conversion tool) is useful to identify the seriously injured persons.
 - A new variable "seriously injured" should be included in the official statistics (based on police data) of road traffic crashes.
 - Annual reporting on the number of serious injuries to the EU and nationally should be started.

• Regular reporting of serious injuries started in 2015.

*Airaksinen, Lüthje (2012): Development of statistics on injury severity of traffic accidents - summary report (in English)



2

** Airaksinen, Kokkonen (2014): Tieliikenteessä vakavasti loukkaantuneiden määrän arviointi VAAKKU (in Finnish, English summary)

Reporting serious injuries - Data

- Based on the personal identification number of persons involved with traffic crashes in police statistics*, the treatment periods, outpatient visits and diagnoses from the Care Register for Health Care** are identified and extracted.
- Based on the ICD-10*** external cause of injury V00–V99 (traffic injuries), all treatment periods and outpatient visits in the Care Register are extracted.
- → Resulting in two datasets on treatment periods/outpatient visits from the Care Register:
 - 1. data based on police statistics
 - 2. data based on ICD-10 external cause

3

- ** Care Register covers information on treatment periods in inpatient care and outpatient visits in public and to some extent in private healthcare.
- *** International Classification of Diseases 10th Revision



^{*} The official statistics of road traffic crashes

Reporting serious injuries – Data processing, key points (1/2)

- **1.** Data based on personal ID-numbers
- Only the ICD-10 injury diagnoses S00-T79 related to traffic crashes are considered.
- Linking the crash and treatment:
 - Time from crash to admission in treatment must not be more than 6 days*
 - Time between treatment periods/outpatient visits must not be more than 1 day

2. Data based on ICD-10 external cause (V01-V99)

- Deletion of treatment periods and outpatient visits included in data 1 (based on ID numbers) to prevent overlap
- Only the injury diagnoses S00-T79 related to traffic crashes are considered.
- A delimitation in the method of arrival and urgency of treatment (=emergency, urgent/immediate need for treatment).

* based on an earlier Finnish study, 85% arrived for treatment within six days of the crash. When the time between
 4 crash and start of treatment increases, the uncertainty of the connection between these events increases



Reporting serious injuries – Data processing, key points (2/2)

- Classification of the severity of all injuries in both datasets is determined using the ICD-AIS map (AAAM*).
- All patients with at least one AIS 3+ injury are considered as seriously injured (MAIS 3+).
- The information on seriously injured persons in data 1 is included in police statistics of road traffic crashes and reported to EU.
- The information on seriously injured persons in data 2 is published separately due to its different structure, and the total number (data 1 + data 2) is reported to EU as additional information.

* The Association for the Advancement of Automobile Medicine: aaam_icd10map_v1.0_Feb2015





Time series – seriously injured



Code for e-scooters has just been generated: V00.8 Accident on other pedestrian conveyance (including electric scooters, electric wheelchairs, other electric pedestrian mobility equipment, baby carriages)

6

Data on seriously injured – two different datasets (1/2)



Finnish Transport Infrastructure Agency

Police statistics
Outside the police statistics (only in Care Register for Health Care)

Data on seriously injured – two different datasets (2/2)

Seriously injured (MAIS3+) in 2021 by road Seriously injured (MAIS3+) in 2021 by road user groups in police statistics (n=368)user groups, only in hospital statistics (n=439) Pedestrians; 42; Other; 24; 7 % Pedestrians; 41; Other; 61; 14 % 11 % 9 % Cyclitsts; 38; 10 % Car or van (driver or passenger); 55; 13 % Car or van (driver or Mopedists or passenger); Cyclitsts; 223; Mopedists or 183; 50 % motorcyclists; 81; 51 % motorcyclists; 59; 22 % 13 %



Challenges and strengths

- ICD-AIS-map underestimates the number of serious injuries by 21-34%*.
- Errors in coding of ICD-10 external cause and diagnoses in the Care Register.
- Lack of information about the crash in half of the cases.
- \odot The reporting delay is too long.

- Established method and quite long time series already in use.
- ☺ We are aware of the shortcomings of the method.
- The method clearly highlights the lack of coverage of police statistics.



9

^{*} Airaksinen N, Nurmi-Lüthje I, Kröger H, Lüthje P. Traffic Inj Prev 2018;19(8): 819–24 Airaksinen N, Heinänen M, Handolin L. Inj 2019;50: 1545–5

Pérez et al. Accid Anal Prev 2019;130:125–35.

The investigation of the serious traffic crashes has started in Finland

- Organised by the Finnish Crash Data Institute (OTI).
- The investigation team works independently, and the members are subject to public liability and a non-disclosure obligation.
- The goal of the investigation is to obtain more extensive and up-to-date information about the serious road traffic crashes and to provide the information for traffic safety work.
- Information is gathered from several sources such as police data, Care Register, traffic crash data from insurance companies.
- MAIS 3+ criteria is used, but others are also considered.
- Due to the high number of cases, the investigation method is significantly lighter than in fatal crashes.
- The investigation is in the stage of development, and we are not yet able to investigate all cases.



Thank you for your attention!



Väylävirasto Trafikledsverket

noora.airaksinen@vayla.fi

X: @AiraksinenNoora LinkedIn: www.linkedin.com/in/airaksinennoora