RE: Helicopter Evacuation of Trauma Victims in Los Angeles: Does It Improve Survival?

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To the Editor

I read with interest this review [1] of the experience from this well-reputed center for the care of trauma. The role of helicopters for the treatment of trauma is indeed controversial in the urban setting and thus this study is relevant. Their study showed that helicopter use did not reduce comparative statistical survival.

What I found interesting is the apparent contrast between what is known as statistical versus clinical significance in this paper. Although the mortality rates were not statistically different across the groups after multivariate analysis, there seems to be a bias, in that the group transported by helicopter was more severely injured as reflected by parameters and the need for interventions in both the pre- and in-hospital phases of care, except for thoracotomy.

The fact that the mortality is not statistically different is not qualified with a comparison to predicted mortality, which may actually reveal the clinically significant difference. One would suspect that the predicted survival for a

less severely injured group would be better than for a more severely injured cohort, thus making this a relevant comparison to examine.

If the helicopter group is shown to have a *less than predicted* mortality, especially if the predicted mortality of the comparison group is as predicted, then it would follow that helicopter transport may improve clinical survival. The in-hospital management, however, remains a confounder that is difficult to quantify.

I would like to challenge the authors to undertake such an analysis and provide this as an addendum to prove or refute their assertions.

References

1. Talving P, Teixeira PGR, Barmbaras G et al (2009) Helicopter evacuation of trauma victims in Los Angeles: does it improve survival? World J Surg 33:2469–2476

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