Conclusion: A significant population of earthquake victims die prior to hospitalization as a direct result of crush injuries. This fact warrants improved disaster planning for prehospital emergency medical services and a better understanding of the pathophysiology and early management of crush injury.

Reference:

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Impact of the 1989 Loma Prieta Earthquake on EMS Personnel and EMS Activities
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Objective: To characterize the activities of EMS personnel during the 1989 Loma Prieta earthquake.

Methods: Researchers sent a retrospective questionnaire to all prehospital care personnel in the San Francisco Bay area [California, USA]. Researchers interviewed selected personnel based on involvement in earthquake response activities.

Results: A total of 622 (41%) of the 1,508 personnel surveyed responded. Of the respondents, 35% indicated involvement in earthquake-related activities. Although most respondents felt resources were adequate and EMS activities sufficient and effective, numerous problems occurred. These included difficulties in reporting for duty, depletion of critical medical supplies, communications problems, coordination and control problems, jurisdictional conflicts, and incident-related stress.

Conclusion: Overall, emergency medical services (EMS) response was ample and effective although problems were identified. An examination of these problems has resulted in a number of vital considerations for future EMS disaster planning.

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Sociopolitical Aspects of Disaster Management
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Worldwide attention was focused instantly on the devastating earthquake in Armenia in 1988 and the nuclear disaster in Chernobyl in 1989 as a result of the glasnost policies pursued by President Gorbachev, prior to which numerous major natural and technological disasters were unknown. Media attention facilitated international response in both instances.

The vital process of recovery and reconstruction in Armenia, however, has been halted entirely by a total blockade of the Republic as a result of political turmoil in the region.