

# Abstracts of Scientific Papers-WADEM Congress on Disaster and Emergency Medicine 2017

## Disaster Psychiatric Assistance Team (DPAT): The Present Situation and Future Measures to Address Disaster

### Psychiatry in Japan

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**Study/Objective:** There is no guidance for mental care teams during disasters; this leads to inefficient activity. For example, the lack of consistency in the number of consultations per team. The Ministry of Health, Labor, and Welfare has a budget which is provided to each prefecture, but without a manual for what mental care teams should do.

**Background:** In addition to those providing medical assistance, many organizations and institutions went to the disaster area to provide mental health care following the Great East Japan Earthquake. However, it became clear that the lack of predefined methods and guidelines resulted in unneeded activity and an uneven distribution of care, and so, these became points for future improvement.

**Methods:** We conducted research about the system of mental care support activities in the Great East Japan Earthquake 2011.

**Results:** The aims of Mental Care teams are: 1) The need for assistance in the acute phase; 2) The need for a coordinator; and 3) The need for preparation during normal times.

**Conclusion:** In order to tackle these shortfalls a new specialist organization, Disaster Psychiatric Assistance Team (DPAT) is able to support the psychiatric care and psychiatric social care in disaster areas, and was created on April 1, 2013. I would like to explain the actual activities in each disaster so far, as well as discuss the future prospects of disaster psychiatry in Japan.

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## Preparedness Analysis for Management of Bleeding during Mass Casualty Incidents, Qom, Iran

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**Study/Objective:** In this study we determine the most important factors affecting the ability to care for Bleeding Patients (BP) during a Mass Casualty Incident (MCI) and devise a tool to assess them in our work setting.

**Background:** Bleeding is responsible for a major part of preventable deaths during trauma and MCIs. An MCI may greatly overwhelm a system's ability to manage BPs. In such settings, implication of usual protocols used to manage trauma patients may not be possible or applicable, while the hospital's inability to provide necessary products in time may hamper optimum care.

**Methods:** An extensive literature review was conducted to determine factors effective in a system's ability to manage bleeding during an MCI. Using the qualitative method these findings were converted to a questionnaire to examine different parts of the response system. This tool was then used to assess different organizations participating in response to an MCI at the city of Qom, Iran.

**Results:** Factors having a significant effect on bleeding and whose restrictions may impair proper management of BPs were divided into three domains: Blood and blood products' supply, prehospital management of bleeding, and in-hospital patient-specific interventions. After assessing different parts of the response system at our work setting, it was found that the system was grossly unprepared to manage bleeding during a mass casualty incident in all three domains. Among the domains, preparedness of the blood supply system was better than others, while prehospital management had the lowest score.

**Conclusion:** Based on the assessment tool we devised, we found the response system at our setting to be unprepared for the management of BPs during an MCI. We believe our questionnaire is a useful and much needed tool, which will expose the limiting factors of providing care for BPs in response systems.

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## Disabled People in Disasters - EC Project "EUNAD-Implementation"

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**Study/Objective:** The specific reactions and needs of mentally and/or physically disabled people in disaster settings, as well as trauma-related psychosocial consequences in the mid- and long-term phase, are a known gap in psychosocial and mental health support. The EUNAD IP project aims toward the implementation and preparation of EU human rights related Assistance Programs for disabled survivors of disasters on the basis of EUNAD (people with visual or hearing disabilities) and EUTOPIA (Target Group Intervention Program) projects.

**Background:** EUNAD IP project is supported by the European Commission, DG Humanitarian Aid, and Civil Protection. Acronym EUNAD IP: European Network for Psychosocial Crisis Management – Assisting Disabled in Case of Disaster – Implementation. Duration: 24 months (2016-2017). Coordinator: Federal office of civil protection and disaster assistance, Bonn, Germany.

Project partners: University of Innsbruck, Austria; Charles University in Prague, Czech Republic; Center for Psychotraumatology,