cardiopulmonary resuscitation, 5 (none successful); control of gross bleeding, 2; reposition of fracture, 1. Fiftyone hospital records have been examined up to now provided evidence that the prehospital measures were life-saving in three subjects and contributed to stabilisation of the patient's condition preventing deterioration prior to hospital admission in another 18 subjects. **Conclusions**: The time from the alert to team response was short in view of the fact that the personnel always were engaged in routine medical work prior to the alert. Methods of transportation (from fire department or ambulance) were adequate. The number of cancellations was annoyingly large, especially in the central district. Measures are needed to increase the accuracy of the alert. The time consumed in the responses was such as to cause delays in routine hospital work, especially during off-office hours. Such a drawback might be relieved by increasing the number of personnel engaged. Medical procedures were judged to be adequate showing sufficient basic training of personnel in disaster medicine. It is our opinion that the teams are a necessary part of the medical obligations of the community.

The complete figures for the year of 1998 will be presented at the Congress of WADEM, where updated data will be available.

Keywords: alert; effects of treatment; medical teams; primary care; procedures; response times; total time

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Mass Casualty in a Pop Music Concert Instead of Being a Programmed Event: Home Fair 1997, Lima, Peru

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Introduction: On 05 August 1997, the main show of the Home Fair 1997 program was provided by two young Venezuelan singers of tropical music, who were very popular with Peruvian teenagers in that time. As a consequence of bad organization and the fanaticism of the young adolescents, four female teenagers and one male died, and approximately 1,000 people were injured. The open auditorium that has an approximate capacity for 20,000 was filled with 100,000 people. The Assisted Transport of Emergency System and other organizations were responsible for the medical assistance and help facilities for that programmed event.

Purpose: To analyze the conditioning factors for mass casualties at a programmed event, and to formulate recommendations about the management of this kind of events.

Methods: Descriptive methods were used to gather data. The prehospital record sheet for responses by The

Assisted Transport System (STAE) was revised. Additional data were obtained from the hospitals to which the victims were referred.

Results: Instead of this event following the path programmed in previous meetings for coordinating actions, on the day of the concert, the situation ran out of control with the tragic result of the deaths of five adolescents. The average age of the victims was 17 years (range: 15-19 years). Four of the victims were women and one was a man. The STAE was in charge of assisted transport and attended a total number of 43 patients, two of them arrived dead to the hospital; 39 were women (90.7%), four (9.3%) were men. The main injuries were: multiple contusions, acute respiratory failure, limb trauma, thoracic trauma, and abdominal trauma. The others three deaths occurred within five days after the event. The approximate number of injuries was 1,000, the majority of them as a consequence of the mass pressure against the people who wanted to be closer to their idols. The main cause of death was traumatic asphyxia. There were no case of cranial trauma.

Conclusion: The disaster was imminent many hours before the concert began. The organizers did not want to cancel it despite of the recommendations made by the Health Commission and the STAE. The main pathology was the trauma and traumatic asphyxia, the principal cause of death. We will discuss recommendations to prevent these kinds of problems, and to prevent disasters of this magnitude.

Keywords: asphyxia; crowds; injuries; mass gathering; planning; trauma; traumatic asphyxia

G-77

Treat and Release: A New Approach to the Emergency Medical Needs of the Oldest Mass Gathering — the Pilgrimage

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The Pilgrimage season in the Holy Land of Makkah possibly is the largest and oldest mass gathering known to mankind. In this activity, at least 2.5-million persons from all of the Muslim countries perform a pilgrimage (Hajj) that requires their presence at specific areas at the same time for a period of 5–7 days. This leads to a high population density that reaches 8–9 persons per square meter.

Like all mass gatherings, the need for emergency medical care was recognized and preparations were made by the Saudi Red Crescent Society (SRCS), the agency responsible for emergency medical services (EMS) in the Kingdom of Saudi Arabia. The plan of the SCRS for the coverage was to respond to all emergency calls through a dispatcher system. Review of this system for a period of five years indicated that the main task was to transfer all patients (7,000–9,000 per year) to the nearest emergency center. The trip time (from dispatch