The European Code Against Injuries (ECAI)

It has been almost two decades since the European Commission has recognized injuries as a priority area for action in the field of public health; yet, injuries continue to pose one of the most significant and costly public health problems in the European Union (EU). Each year, injuries claim the lives of more than 235,000 EU citizens, constituting the fourth most common cause of death following cardiovascular diseases, neoplasms and diseases of the respiratory system, whereas they rank first in terms of potential years of life lost. With regard to the underlying intent, about two-thirds of annual injury deaths are being reported as "accidental", namely unintentional.

"Accidental" injuries have been historically considered as lesions caused by random occurrence or chance events; as such they were regarded as events beyond an individual’s control. This notion has contributed to a substantial fragmentation of preventive efforts. Nowadays, however, it has been recognized that the underlying causes of most unintentional injuries can be understood and predicted, which makes injuries largely preventable. Indeed prevention of this large injury category has seen over the years prominent examples of effective practices, stemming mainly from the field of road traffic safety. Mandatory seat belt use, for instance, has been one of the greatest success stories of unintentional injury prevention. First introduced in the 1960’s as optional features in new cars, seat belts soon proved so effective in reducing fatal and serious injuries that, in 1971, the State of Victoria, Australia, introduced mandatory legislation requiring the presence and use of seat belts in all cars. By the end of that year, the rate of car occupant deaths declined by 18%.

The wide variation in unintentional injury mortality rates across EU Member States suggests that there is still scope for prevention, as expressed in the variable usage rates of injury preventive measures despite the availability of effective practices. Thus, although the protective effect of seat belts has been already established and mandatory seat belt use laws are available in all EU countries, seat belt wearing rates among the general population range from 97% (France) to 40% (Greece) in front seats, and from 90% (Germany) to 15% (Greece) in rear seats. To this end, the ultimate goal of the European Community Action Plan was to promote injury prevention initiatives in order to reduce injury mortality and morbidity and to ensure that the Community becomes a safer place to live in.

In contrast to other causes of disease or premature death, injuries can be prevented not only by making the living environments and the consumer products safer, but also by involving people to actively participate by adopting safer behaviors. In the light of this approach, the European Code Against Injuries (ECAI) was developed in the context of the EU co-funded project APOLLO ("Strategies and Best Practices for the Reduction of Injuries"), which is coordinated by the Center for Research and Prevention of Injuries (CEREPRI), Athens University Medical School. Following the successful example of the European Code Against Cancer, ECAI is an awareness raising tool for injury prevention and safety promotion addressing the European citizens. It consists of 60 simple, comprehensive and evidence based messages regarding preventive measures that have shown to be effective in reducing the injury death toll. The messages have been customized to reflect the EU diversity and are divided into nine prioritized categories of unintentional injuries, notably road traffic injuries, falls, poisoning, burns, drowning, sport injuries, product-related injuries, occupational injuries and alcohol-related injuries.

In this Supplement, we pleasantly introduce ECAI and present the scientific justification for the choice of the specific messages that were used in ECAI development. The Supplement comprises nine different papers, each one focusing on each one of the injury types prioritized for the EU by means of a Delphi technique. Injury type-specific, evidence-based practices scrutinized through systematic literature reviews were included in ECAI following European injury prevention Experts’ opinions as-
essment. Specifically, the papers comprising the current Supplement, provide the Reader with information on the definition and the burden of each injury type, the most prevailing risk factors as well as the available evidence based effective practices.

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REFERENCES