

Prehospital Tranexamic Acid for Severe Trauma

INTERNATIONAL, DOUBLE-BLIND, RANDOMIZED, PLACEBO-CONTROLLED TRIAL

In adults with major trauma at risk for trauma-induced coagulopathy, does prehospital administration of tranexamic acid, compared to placebo, improve survival with a favorable functional outcome?

657

TRANEXAMIC ACID

Intravenously as a bolus dose of 1 g before hospital admission, followed by a 1-g in a 1 L NS infusion over a period of 8 hours after arrival at the hospital

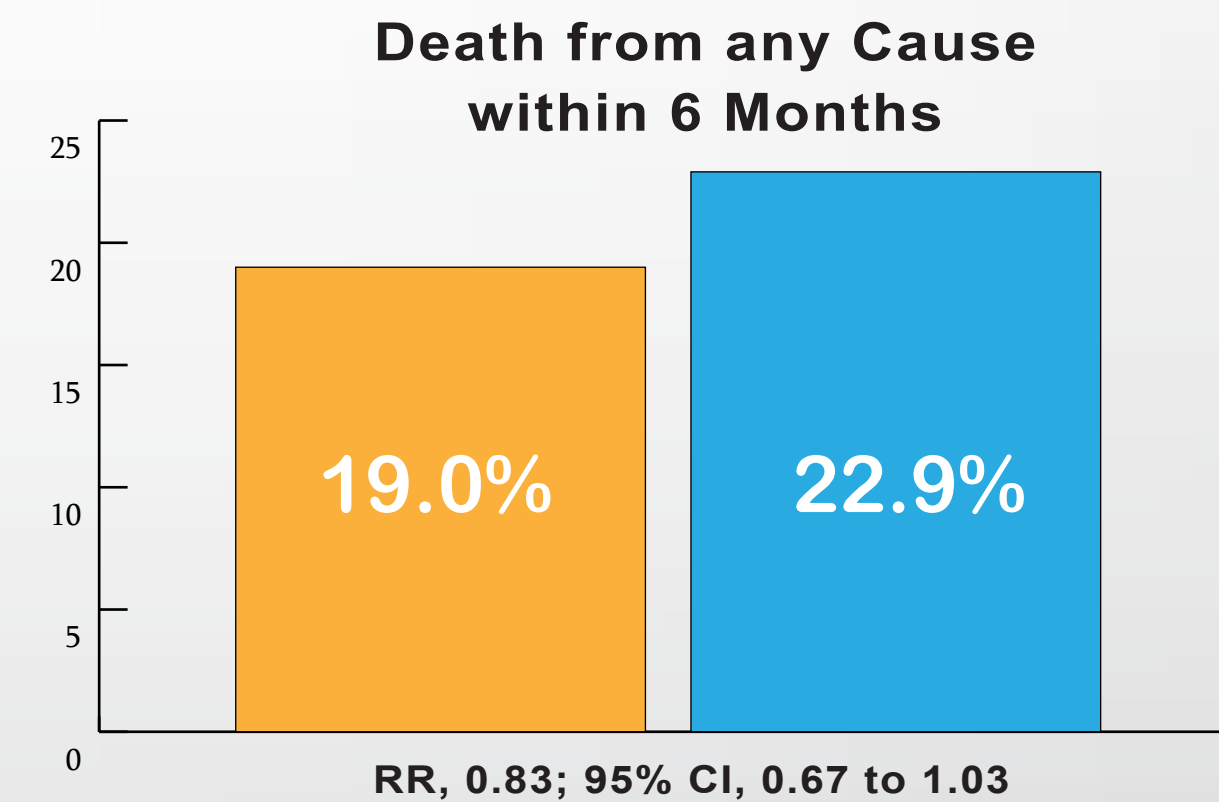
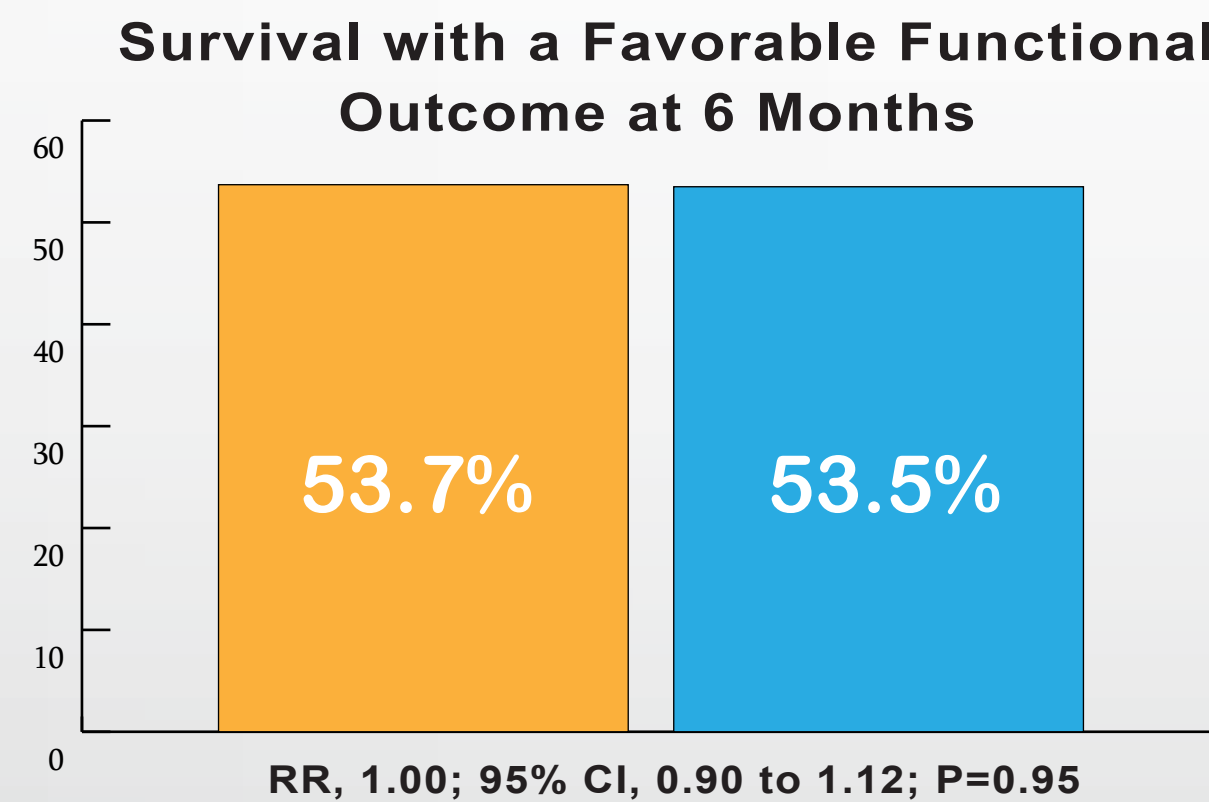
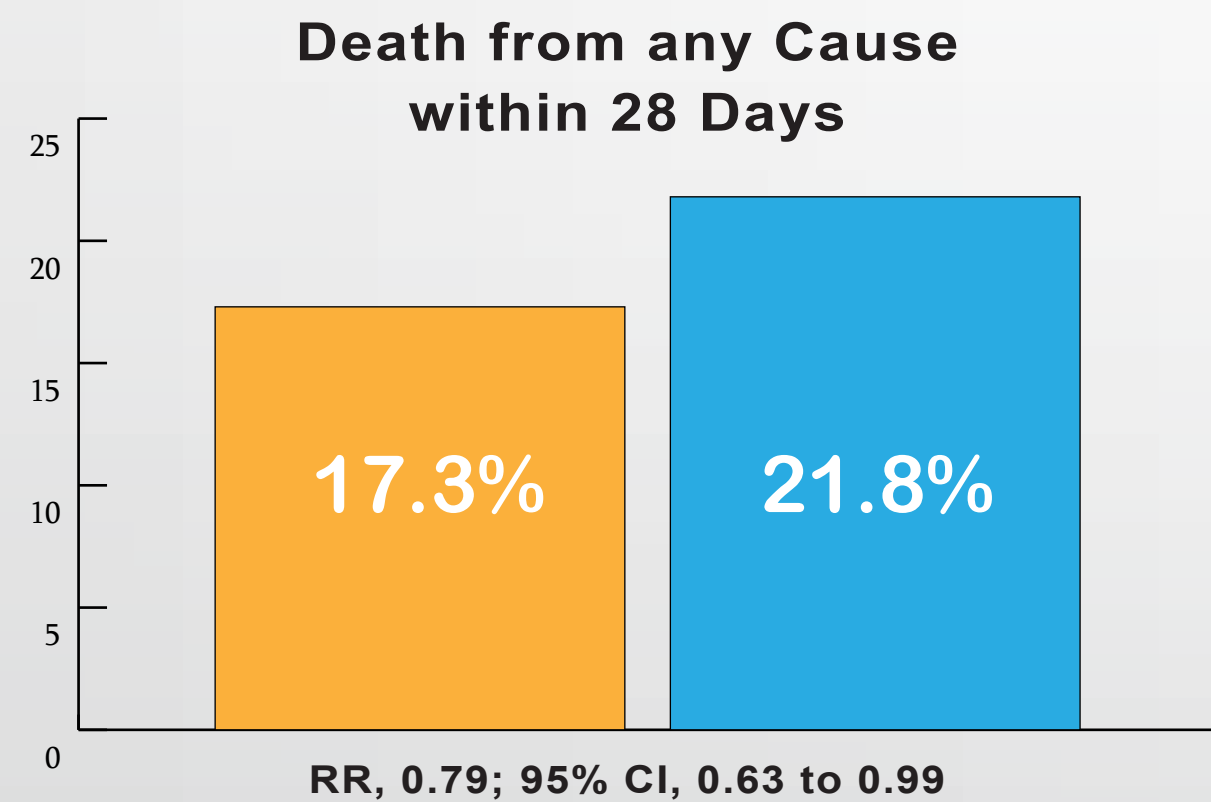
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PLACEBO

Intravenously as a bolus dose of 10 ml 0.9% normal saline before hospital admission, followed by a 10 ml added to 1 L NS over a period of 8 hours after arrival at the hospital.

PATCH-Trauma

15 emergency medical services and 21 hospitals in Australia, New Zealand, and Germany



In adults with major trauma and suspected trauma-induced coagulopathy treated in advanced trauma systems, administering tranexamic acid before hospitalization didn't increase 6-month survival with a favorable outcome compared to a placebo