

**Preventable Trauma Deaths and Corrective Actions to Prevent Them:  
A 10-Year Comparative Study at the Komfo Anokye Teaching Hospital, Kumasi, Ghana**  
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**Purpose:** We sought to determine the rate of preventable trauma deaths in an African hospital, identify the potential effect of improvements in trauma care over the past decade, and identify deficiencies in care that still need to be addressed.

**Methods:** A multidisciplinary panel assessed pre-hospital, hospital, and postmortem data on 89 consecutive in-hospital trauma deaths over 5 months in 2017 at the Komfo Anokye Teaching Hospital. The panel judged the preventability of each death. For definitely and potentially preventable deaths, the panel identified deficiencies in care.

**Results:** 13% of trauma deaths were definitely preventable, 47% potentially preventable, and 39% non-preventable. In comparison with a panel review in 2007, there was no change in total preventable deaths, but there had been a modest decrease in definitely preventable deaths (25% in 2007 to 13% in 2017). There was a notable change in the pattern of deficiency ( $P = 0.001$ ) with decreases in pre-hospital delay (19% of all trauma deaths in 2007 to 3% in 2017) and inadequate resuscitation (17% to 8%), but an increase in delay in treatment at the hospital (23% to 40%).

**Conclusion:** Over the past decade, there have been improvements in pre-hospital transport and in-hospital resuscitation. However, the preventable death rate remains unacceptably high and there are still deficiencies to address. This study also demonstrates that preventable death panel reviews are a feasible method of trauma quality improvement in the low- and middle-income country setting.