Abstract

Background: The burden of injury in low-income countries is greater than in high-income countries, but injury documentation and prevention policies are inadequate. The who, where and how of firearm injuries in Kenya has received little attention. Objective: This study describes the epidemiology of small and light firearm injuries to highlight the problem and stimulate further methodologically and scientifically sound research in the area. Method: This retrospective study involved abstracting socio-demographic data, injury mechanism, intention, resources consumed and outcome information from case notes in the records departments of two major health facilities in Nairobi. Results: Eight hundred and fifty two hospital admissions due to gun-shot injuries were recorded between 1997 – 2002 (average, 142 per year) representing 1.8% of all injury admissions, and 0.2% of total admissions at the two hospitals. There were 10 times more male admissions and 89.9% of those involved were in the 15-44 year age group. Six hundred and twenty nine (85.9%) of the admissions were as a result of intentional injuries (assaults) while 101 (13.8%) were as a result of unintentional injuries. Forty two (5%) patients died in hospital while 800 (94.5%) were discharged home. The burden on health care facilities included a total of 15,392 ward days for 841 patients whose records were available and a total of 144 ICU days for 19 patients. Seven hundred and eighty four (92.9%) patients underwent some form of surgery, mostly limb surgical toilet with wound excision/debridement. Hospital resources used included 3346 units of intravenous fluids and 518 units of blood. Conclusion: The study recommends that policy makers be sensitized on the magnitude of this problem and more studies on risk factors to be carried out so that the process of testing interventions can begin.