

What's new in Wilderness Medicine (2022)

Some of the new information and major changes included in *Therapeutic Guidelines*.

The Wilderness Medicine guidelines have been revised by a dedicated group of clinicians with expertise in remote, wilderness and expedition medicine. The content focuses on medical scenarios that are more likely to occur in these settings, although many of them could also occur in non-remote environments.

Good preparation and education can prevent incidents in the wilderness; the updated Wilderness Medicine guidelines include new information on prevention of illness in each topic. Emphasis on pathophysiology has been added to aid recall of presenting features and understanding of the rationale for management.

Two new topics are **Bites, stings and rashes in the wilderness** and **Tick bite**. Carry an ether-containing spray if heading into dense vegetation that may be tick bite country, so you can freeze ticks which should then drop off the skin. Fashion choices are also useful in bite and sting prevention—consider anti-leech socks and permethrin-impregnated clothing.

Heat-related illness includes links to WorkSafe Australia's advice on working in the heat and Sport Medicine Australia's guide to safe conditions for playing specific sports. Suspected heat stroke requires immediate vigorous cooling to avoid neurological damage. Ice-water immersion is the most effective means of cooling, working twice as fast as evaporative cooling using sprayed water and fans.

Accidental hypothermia explains the importance of slow rewarming to avoid triggering 'afterdrop' of the core body temperature when cool blood returns to central circulation from the peripheries. A severely hypothermic person may have no signs of life and yet may recover fully (sometimes after many hours of arrest). The approach to resuscitation in hypothermia differs from standard resuscitation and is detailed in the revised topic. **Frostbite** can accompany hypothermia but can also follow direct contact with ice packs, or very cold substances at work. New guidance outlines risk reduction and management of injury.

Although no locations in Australia are at high enough altitude to cause altitude illness, people travelling overseas can visit high altitude illness locations. The printable patient information sheet in the **Altitude illness** topic can help them plan a safe rate of ascent to limit the risk of acute altitude illness. Updated drug recommendations and a new summary on the urgency of descent explain the treatment approach based on severity of presentation.

Electrical injury lists ways to minimise the risk of being struck by lightning. Adopting the 'lightning position' (crouching or sitting while minimising the point of contact with the ground) is a last resort! Lightning strike injuries can include temporarily fixed and dilated pupils, giving the misleading impression that a person is dead. Resuscitation in electrical injury is detailed in the updated topic.

Changes in pressure experienced in different phases of a scuba dive can lead to barotrauma or decompression sickness. **Diving medicine** has a new section outlining the role of health professionals in determining fitness to scuba dive and advises on emergency management of diving-related illness. People in distress after a dive may need urgent treatment for decompression sickness or arterial gas embolism—emergency advice for health professionals is available from the Divers Emergency helpline on 1800 088 200 anywhere in Australia.

Hypoxaemia has a central role in injuries sustained in drowning, so optimal ventilation is required as early as possible. The completely revised **Drowning** topic highlights the value of the public, as well as clinicians, learning resuscitation techniques.

Many conditions encountered in the wilderness or other extreme environments require swift action, and a quick guide to management can be crucial. A printable guide to **managing heat-related illness** is available for use in the field. New printable flowcharts are also available to summarise **Management of hypothermia** and **Management of a person who has drowned**.

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