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Triage

Perhaps no one needs to be reminded of the results that would follow a nuclear war, but if anyone does we suggest that he read the article entitled "Sorting—the key to management of victims of disaster," by Lt. Col. H. Haskell Ziperman [*J. Am. Med. Assoc.* 162, 1438 (15 Dec. 1956)]. Sorting, or triage, has as its aim the classification of the sick and injured according to type and degree of disability in order that they may receive the most appropriate medical care with the least delay. Triage was developed in combat medicine, but, as Ziperman points out, the principles are, with only slight modification, applicable to civilian disaster.

The method consists essentially in establishing a system of priorities for the treatment of mass casualties. Inasmuch as all injured persons cannot be cared for at once, priorities must be established on the basis of the severity of the injury and the urgency for treatment. The casualties must be sorted and sent to medical stations that are prepared to deal with particular types of injury. Or, if supplies are limited and nearly certain to remain so, they should not be rationed equally but should be used according to a systematic principle of evaluation. If, to use one of Ziperman's examples, ten people are suffering from shock and there is only enough blood on hand to treat two, then it is better to treat only two than to waste the blood by treating all ten with an inadequate amount.

But which two? As in military medicine, other principles will have to be taken into account in the event of civilian disasters. It will not be enough to decide whether or not a life can be saved. The sorting officer will be obliged to superimpose another set of values and a correlated set of priorities. When the survival of the whole society is at stake, the sorting officer must decide whether the injured person is likely to return to effective civilian life or whether he will be a burden on the resources available. In short, in a society fighting for survival, a judgment about the value of the injured people to that society would have to be made. The sorting officer would in addition have to decide nonmedical questions of this kind: two people have injuries of equal severity, but only one can be treated. Which one? Surely the reasonable answer would have to be that the one to be saved would be the one who was of the greatest potential value to the survival of the society.

A grim choice! But it is a choice that will have to be made, and made often, should we fail to find a way to avoid nuclear war.—G. DuS.

