

## Aerial firing and stray bullet injuries – A rising tide

**Syed Asad Ali**

Liaquat University of Medical & Health Sciences, Pakistan

In addition to the homicidal, suicidal and accidental cases of fire arm injuries aerial firing resulting in stray bullet injuries is a new tide rising in our country. The common people think that aerial bullets vanish in the air / space like explosives and fire work but this is not true in fact these bullets make a projectile motion in space and come back to surface to hit anything which comes in their way. Many of the victims are unaware of the fire arm event and hence a quite a healthy number of them seek medical advice few days later. The incidence of stray bullet injuries are more common during the night hours as most of the victims at the time of incidence were sleeping on the roof of their houses during the summer.

The incidence of aerial firings usually increases during the marriage seasons, political rallies, cricket team victories, Eid and Independence Day festival, eruption of violence and political unrest and New Year celebrations. In tribal areas birth of a male child is usually celebrated by aerial firing.

Almost all age group irrespective of sex are victims of aerial firing but male adults are the usual victims. However stray bullet injuries are usually single and non fatal then other type of bullet injuries as they usually lodge in subcutaneous tissues with less mortality and morbidity. Our youngest victim was a one year old baby girl with a stray bullet impacted firmly to right femoral area. Majority of these cases were treated conservatively and kept under observation for next twenty four hours. However few of the patients with superficial palpable bullets causing discomfort were retrieved under local or short general anaesthesia.

Most of the stray bullet in our study hit the upper part of the body especially head and neck and upper chest. However few of the bullets may enter the peritoneal cavity which demanded exploratory laparotomy but 50% of them were treated conservatively. Limbs are the least affected areas in our study.

The usual history narrated by the patient, is injury by stone with sudden feeling of a wetness on the cloths which reveals fresh blood. The victims with abdominal stray bullet injuries usually attend A & E department soon after the event. However some of the patients of stray bullet were picked up by radiographs and they were unaware of the event. There are cases where the stray bullets after entering the body wanders to near by area like a bullet hitting the cheek lodge into submandibular area, stray bullet hitting chest wall was wandering in abdominal cavity and a bullet penetrating the jejunum was drag down by peristalsis movements to the terminal ileum.

We presents audit of 55 cases of stray bullet injuries referred to A & E department or admitted in our surgical emergency for the past two years.

sasadalishah@gmail.com