



Journal of Coastal Life Medicine

journal homepage: www.jclmm.com

Letter for editor

doi:10.12980/JCLM.3.2015JCLM-2014-0099

© 2015 by the Journal of Coastal Life Medicine. All rights reserved.

Caisson disease in Thailand: Death rate

Beuy Joob^{1*}, Viroj Wiwanitkit²

¹Sanitation 1 Medical Academic Center, Bangkok, Thailand

²Hainan Medical University, Haikou, China

Dear editor,

Caisson disease is an important condition that can be seen in diver. It is an important form of decompression illness that requires proper therapeutic management^[1,2]. The problem can be sporadically seen in any coastal country. In Thailand, as a country with a long coastal line of more than one thousand kilometers, this problem can be seen. According to the recent report, this condition is an important consideration in maritime occupational health^[3]. However, there are limited numbers of publications in caisson disease. Gold *et al.* published a paper on the illness in local diver but it is not specific to the caisson disease^[4]. Here, the authors try to summarize the published paper on caisson disease in Thailand and try to find out the death rate in the cases. The authors use search engines as PubMed and Thai index medicus for searching. According to the searching, there are only 2 local publications on caisson disease^[5,6]. In addition, the incomplete information can be seen in the published paper (due to the nature of local publication with low academic quality). Of interest, on the cases with available data, overall death rate of caisson disease in Thailand is equal to 100%. In fact, there are many explanations for the observed extremely high death rate. First, as note, due to the incomplete record and report, the available data might be only on the death cases. In fact, case recording and reporting is the critical step for proper disease surveillance for caisson disease^[7,8]. Second, this might reflect the poor technology for management of caisson disease in Thailand. In fact, there are only few medical centers in Thailand that can care caisson disease. In Thailand, the available hyperbaric oxygen therapy is routinely used for other purposes, not for the management of caisson disease^[9-11].

Conflict of interest statement

We declare that we have no conflict of interest.

References

- [1] van Hulst RA. Treatment of decompression illness with heliox: the best of both worlds? *Diving Hyperb Med* 2014; **44**(2): 101.
- [2] Mahon RT, Regis DP. Decompression and decompression sickness. *Compr Physiol* 2014; **4**(3): 1157-75.
- [3] Siriruttanapruk S. The situation of maritime occupational health in Thailand. *Int Marit Health* 1999; **50**(1-4): 63-8.
- [4] Gold D, Geater A, Aiyarak S, Wongcharoenyong S, Juengprasert W, Johnson M, et al. The indigenous fisherman divers of Thailand: diving-related mortality and morbidity. *Int J Occup Saf Ergon* 2000; **6**(2): 147-67.
- [5] Bureau of Epidemiology, Thailand. [Decompression sickness (caisson disease) reported cases of caisson disease Thailand, 1992-1995]. *W Epidemiol Surveil Rep* 1997; **28**: 49-50, 57-9. Thai.
- [6] Singjaroen T, Pekan P, Suchato C, Virawaitaya S. Roentgen demonstration of air embolism in caisson disease. *J Med Assoc Thai* 1988; **71**(1): 58-9.
- [7] Edmonds C, Caruso J. Diving fatality investigations: recent changes. *Diving Hyperb Med* 2014; **44**(2): 91-6.
- [8] Bove AA. Diving medicine. *Am J Respir Crit Care Med* 2014; **189**(12): 1479-86.
- [9] Sampanthavivat M, Singkhwa W, Chaiyakul T, Karoonyawanich S, Ajpru H. Hyperbaric oxygen in the treatment of childhood autism: a randomised controlled trial. *Diving Hyperb Med* 2012; **42**(3): 128-33.
- [10] Imsuwansri T, Poonsap P, Snidvongs K. Hyperbaric oxygen therapy for sudden sensorineural hearing loss after failure from oral and intratympanic corticosteroid. *Clin Exp Otorhinolaryngol* 2012; **5**: S99-102.
- [11] Chungpaibulpatana J, Sumpatanarax T, Thadakul N, Chantharatreeat C, Konkaew M, Aroonlimsawas M. Hyperbaric oxygen therapy in Thai autistic children. *J Med Assoc Thai* 2008; **91**(8): 1232-8.

*Corresponding author: Beuy Joob, Sanitation 1 Medical Academic Center, Bangkok, Thailand.
E-mail: beuyjoob@hotmail.com

Article history:
Received 28 Jul 2014
Received in revised form 1 Aug 2014
Accepted 15 Aug 2014
Available online 29 May 2015