E-SCOOTER ACCIDENTS

overview: BELGIUM

explorative study



METHODOLOGY





HOSPITALS INVITED **TO THE STUDY**

BRUSSELS:

- UMC Sint Pieter claimed minor problem with no track.
- CHIREC has initially responded but did not participate due to lack of time.

UZBrussels did not answer the invitation.

WALLONIA:

The remaining hospitals did respond to the not invitation.

FLANDERS:

- Jan Palfijn an Middelheim Antwerp claimed no cases or minor incidents with no track.
- Stuivenberg Antwerp referred to UZAntwerp.
- UZAntwerp requested a permission from an ethical committee but did not participate regardless of providing one.
- All hospitals in Gent referred to UZ Gent.
- No hospital in Leuven answered the invitation.

BRUSSELS CAPITAL REGION	Laeken	CHU Brugmann - Victor Horta site*			
	Schaerbeek	CHU Brugmann- Paul Brien site*			
	Saint-Gilles	UMC Sint-Pieter Campus			
	Jette	Universitair Ziekenhuis Brussel			
	Auderghem	CHIREC Hôpital Delta			
	Brussels	Clinique Saint Jean*			
WALLONIA	Namur	Hospital Center Régional De Namur			
	Namur	CHU UCL Namur De Sainte-Elisabeth			
	Namur	Clinical Saint-Luc Bouge			
	Liège	CHU de Liège*			
	Liège	Centre Hospitalier Régional de la Citadelle			
	Liège	Centre Hospitalier Chrétien Clinique Saint-Joseph			
FLANDERS	Antwerp	Universitair Ziekenhuis Antwerpen			
	Antwerp	ZNA Campus Stuivenberg			
	Antwerp	ZNA Campus Middelheim			
	Antwerp	ZNA Campus Jan Palfijn			
	Leuven	Algemeen Ziekenhuis Heilig Hart			
	Leuven	UZ Campus gasthuisberg			
	Gent	UZ Gent*			
	Gent	AZ Jan Palfijn			
	Gent	AZ Sint-Lucas			
	Gent	AZ Maria Middelares: Campus Algemeen			

* Hospitals that have participated



STUDY SCOPE

INJURY TYPE	1	minormajor	 musculoskeletal craniofacial soft tissues
ADMISSION	2	by ambulanceby one's own	
TIME	3	morningduring the day	evening night
LOCATION	4	bicycle pathroadpavement	
O W N E R S H I P	5	privateshared	
AGE	6	 <18 18-30 41-50 31-40 >50 	
HELMET	7	• yes • no	
INTOXICATION	8	yes no	
3rd PARTY INVOLVEMENT	9	• yes • no	 pedestrian bicycle car other
CAUSE	10	Maneuver that lead to the accid	dent
FREQUENCY	11	General pattern of admission fr	equency



RESULTS overview





RESULTS time, space & weather





RESULTS user behavior





RESULTS scope of injuries





RESULTS

doctors recommendation



Mandatory



with chin protection and additional protection for wrists and elbows



Rising awareness of risk and good practices by

USERS TRAINING & EDUCATION



Adapt
INFRASTRUCTURE

with the e-scooter structure in mind (small wheels, weight/power ratio)



REVIEW

good practices in Europe

	Austria	Belgium	Denmark	Finland	France	Germany	Italy	Norway	Portugal	Spain	Sweden	Switzerland
Max. speed <20 km/h			x			Х		х				х
Speed regulator required							Х					
Mandatory helmet				х					х			
Reflective clothing					х							
Headphones forbidden					х					х		
Lights on 24/7			х									
No riding on the sidewalk	x		х	х	х	х			х		х	
If roads, only up to 30km/h							Х					
lf roads, only up to 50km/h					х							х
Only urban areas					Х		Х			Х		
Only urban areas No riding under influence			x		Х	x	Х			Х		
Only urban areas No riding under influence Wild parking regulation			X		x	x x	X			Х		
Only urban areas No riding under influence Wild parking regulation Allowed above 18 y.o.			X		x	x	x			X		





SUMMARY

The results of this explorative study are different to the information published over the last months in the Belgian media. However, our findings are in line with the results of the survey conducted by *Bruxelles Mobilité* (summer'19) in terms of differences between users who own a private device and those who use rental schemes; the nature of accidents (minor involvement of 3rd parties) and the significance of the problem (13% who encountered an accident in the sample of 1176 users, 2,5% of users who required medical intervention).

Possible discrepancy in the results might be due to:

 STRONG LOCATION FACTOR: the number of accidents can vary significantly between hospitals (e.g. *Brugmann Laeken* report on average 1 person per week, while *Brugmann Schaerbeek* 2-3 persons per week).

This is relevant also for the time of the accident and alcohol intoxication- a recent study from *St. Pierre**(Brussels) discovered that over half of e- scooter accidents take place after 8:00 PM, often when users have consumed alcohol, which was not confirmed by findings from other hospitals.

 DATA SOURCE: a more in-depth interview with the patient might be conducted only after one is admitted to the hospital ward. Cognately, these patients would encounter more serious injuries, therefore the information coming from the ward rather than the emergency room might vary in terms of seriousness of the problem.

However, some of contacted hospital claimed the problem is not significant and there has not been enough cases to investigate it and therefore they declined their participation. This insight and the interviews conducted in Liège and Ghent confirm that the problem is valid mainly in Brussels, with larger scale in highly-penetrated areas, which suggests a correlation with an availability of sharing schemes.

The injuries, even if mostly minor, require a considerable recovery time. Furthermore, rare, but serious head traumas (craniofacial injuries) have a severe consequence. All interviewed doctors urged for actions toward increasing awareness of the importance of helmets and the relevance of the practical training before riding in urban environment.

The study was conducted in the between August and October 2019.



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