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Prevalence of Road Traffic Accidents in Iran: A Systematic Review, GIS and Meta-Analysis

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Abstract

Context: One of the major causes of death in Iran is the injuries caused by accidents. Information regarding the distribution of injuries caused by accidents can lead to appropriate decision making in the management of Red Crescent, emergency, and police forces.

Objectives: The current study is carried out with the aim of studying the prevalence of road traffic accident in Iran using the GIS and meta-analysis study.

Evidence Acquisition: Articles were identified through international searching databases including Pub Med, Scopus, Elsevier, Google Scholar, and Web of Science as well as Iranian Scientific Information Database (SID), Health barakatkns, MagIran, and Iran Medex. We systematically reviewed all studies reporting the prevalence of accident trauma in Iran.

Results: A total of 2200 relevant records were identified by the electronic search, of which a total of 60 studies were identified as eligible papers, which were meta-analyzed for the pooled road traffic accidents in Iran. Overall, the prevalence of road traffic accidents in Iran was estimated as 51.50% (95% CI = 50.6% - 52.3%). The highest pooled road traffic accidents rate was related to the Guilan province (79.80% = 79.1% - 80.5%), while the lowest pooled road traffic accidents rate was in the Fars province, with the rates of 27.50% = 26.3% - 28.8%. A descending of prevalence trend rate was observed during the year 2000 until 2010 ($53.30\% \rightarrow 46.90\%$), however, after the year 2010 this trend increased ($46.90\% \rightarrow 52.50\%$).

Conclusions: The result showed the prevalence of the road traffic accidents decreased from North to South of Iran. In addition, more results showed an increasing trend of the rate of road traffic accidents in Iran, therefore, design safety strategy, according to the province and time trend, can be helpful.

Keywords: Accidents, Death, Geographic Information Systems, Injuries, Prevalence, Road, Systematic Review, Traffic

1. Context

The injury's issue is one of the most important subjects in the field of health. This subject tends to serious socioeconomic and health problem in the world (1). Injuries are the second major cause of mortality in Iran (2, 3).

One of the major causes of injury in Iran is the trauma caused by traffic accidents (4). Road traffic accidents are the most important causes of mortality and morbidity in the world (5). It should also be stated that road traffic accidents happen more in developing countries rather than developed countries (6). One such occurrence can be attributed to the factors such as the growing number of vehicles, changes in lifestyle, and high-risk behaviors (6, 7). Information regarding the distribution of injuries caused by an accident trauma can lead to appropriate decision making in the management of Red Crescent, emergency, and

police forces. It must be said that although many studies have been published regarding the prevalence of a road traffic accident in different cities of Iran (2), a lack of strong evidence in this field has been felt.

2. Objectives

Therefore, this systematic and meta-analysis study, with the aim of mapping the prevalence of accident trauma in Iran, has been done using the GIS model.

3. Evidence Acquisition

3.1. Search Strategy

The literature on the accident trauma prevalence in Iran was acquired through international searching

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databases including PubMed, Scopus, Elsevier, Google Scholar, and Web of Science as well as Iranian scientific information database (SID), Health.barakatkns, MagIran and Iran Medex 1996 to 2018. Our last search was conducted on Aug 08, 2018. In order to search and include as many related studies as possible, we used the following terms: "road traffic accidents", "trauma", "accident", "prevalence", "injury", "traffic", and the name of the province of Iran.

3.2. Selection of Studies and Data Extraction

Published studies were regarded as qualified for analysis if they met the following criteria: 1- studies with the entire text available in the Farsi or English language; 2-studies with a sample size of more than 70, and 3- studies that reported the prevalence of accident trauma in Iran's province. Conversely, the following were excluded: 1- non-English or Farsi full-text reports; 2- studies that were done on just accident trauma, and 3- articles with non-relevant titles.

3.3. Data Extraction

All articles categorized as potentially relevant were reviewed separately by two of the authors (Mohammad Gholami-Fesharaki and Alireza Najimi-Varzaneh). They evaluated the relevance and eligibility of each report and summarized the following data using excel data sheets: first author's name, year of publication, year of study, sample size, percent of the male gender, and mean age of responder. The analysis was conducted according to the preferred reporting items for systematic reviews and metanalysis (PRISMA) (8). In this study, for better data extractions, blinding in addition task separation (9) were used.

3.3. Statistical Analysis

In the current meta-analysis, the prevalence rate of road traffic accidents from each province of Iran was analyzed by the meta-command in the Stata software version 11 (StataCorp. 2009. Stata Statistical Software: Release 11.0 College Station, TX: StataCorp LP). Statistical tests of heterogeneity among the studies were carried out using the Q test (P < 0.10) and I-squared statistics. According to the result of the heterogeneity test, we used fixed- or randomeffect models for determining the prevalence rate of accident trauma. In this study, due to the fact that some provinces have one or even no study, we use neighborhood provinces pooled Meta estimation for such a province. For example, for the province of Hormozgan, we pooled studies reported in Sistan and Baluchestan, Fars, and Kerman. This method was also used for the provinces with one published article. In such a province, the weight for this province was considered three times more than neighboring provinces. For example, in the Qom pooled Meta estimation the weight for the Qom study was three times more

than Isfahan, Tehran, Semnan, and Markazi studies. In this study, work by Khorshidi et al. (10) and Rasouli et al. (11) due to a large sample size and distracting, pooled estimation toward these two studies were removed from the final meta-analysis. In the current study, maps and figures indicating the geographical distribution of the prevalence of road traffic accidents and prevalence time trends were prepared by using the ArcGIS software Release 9.2 (ArcGIS, Redlands, CA. USA), and Microsoft Excel, respectively.

4. Results

4.1. Search Results and Study Selection

The study selection process is depicted in Figure 1. A total of 2,200 studies were potentially associated with the prevalence of road traffic accidents in Iran's province, of which 380 duplicates were excluded. After reviewing the abstracts and titles, 1,722 studies were eliminated based on the stated inclusion and exclusion criteria. After the full-text screening, a total of 70 records were deemed as eligible papers published between 1995 and 2018, however, in quality assessment 10 articles were also removed. Finally, 60 articles were reviewed and used in the meta-analysis study.

4.2. Prevalence of Accident Trauma in Iran's Provinces

Data on the prevalence of road traffic accidents as well as other indicators like first author name, year of publish, year of study, mean age, and male percent of each study were presented in Table 1. In addition, the pooled prevalence of road traffic accidents, according to the 31 prevalence of Iran, was presented in Table 2 and Figure 2. Overall, the prevalence of accident trauma in Iran was estimated as 51.50% (95% CI = 50.6% - 52.3%). The highest pooled road traffic accidents rate related to the province of Guilan (79.80% [95% CI = 79.1% - 80.5%]), while the lowest pooled accident trauma rate was in the Fars province with the rates of 27.50% (95% CI = 26.3% - 28.8%). The GIS map of the prevalence of road traffic accidents was presented in Figure 3. More results showed that 73.09% (95% CI = 73.04% - 76.13%) of road traffic accidents occurred in males. The result of the pooled prevalence of road traffic accidents during time was presented in Table 3 and Figure 4. As it is shown, in this table and figure, a descending of prevalence trend rate was observed during the year 2000 until the year 2010 (53.30% \rightarrow 46.90%), while after the year 2010 this trend was increasing (46.90% \rightarrow 52.50%).

5. Discussion

Review of the prevalence of road traffic accidents showed two population base studies in Iran. Work by Khorshidi et al. (10) and Rasouli et al. (11) in the year 2011, showed 52% and 32% prevalence of accident trauma in Iran.

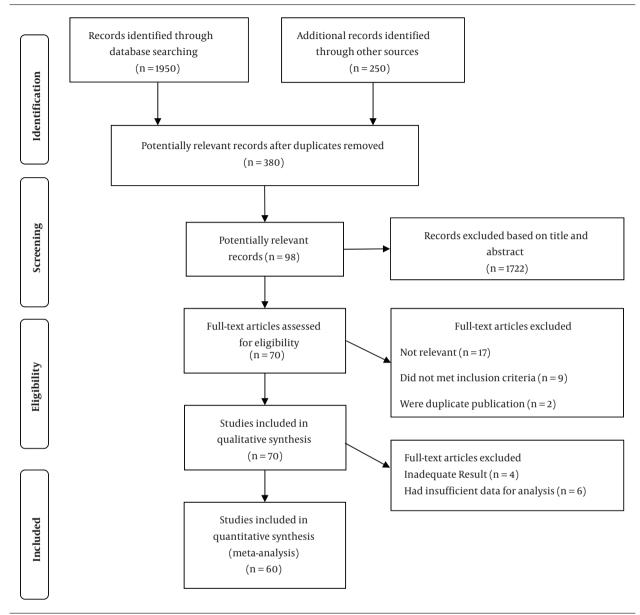


Figure 1. Screening of articles based on PRISMA statement

Given that both studies were done in the same year, it was expected that these two prevalence would be close together, however, it did not happen. The results of this study showed that the pooled prevalence estimation of road traffic accidents in Iran was 51.50% (95% CI = 50.6% - 52.3%). The result of this study was close road traffic accidents to the Khorshidi et al. study (10). The further result showed the prevalence of decrease from north to south of Iran. Therefore, the highest pooled road traffic accidents rate was related to the province of Guilan (79.80% [95% CI = 79.1% - 80.5%]), while the lowest pooled road traffic acci-

dents rate was in the Fars province with the rates of 27.50% (95% CI = 26.3% - 28.8%). This result, with a little difference, is similar to the Alizadeh et al. study (4). The result of the pooled prevalence of road traffic accidentss showed that a descending of prevalence trend rate was observed during the year 2000 until the year 2010 (53.30% \rightarrow 46.90%), while after the year 2010 this trend was increasing (46.90% \rightarrow 52.50%). Such a trend has been seen in the Alizadeh et al. study (4).

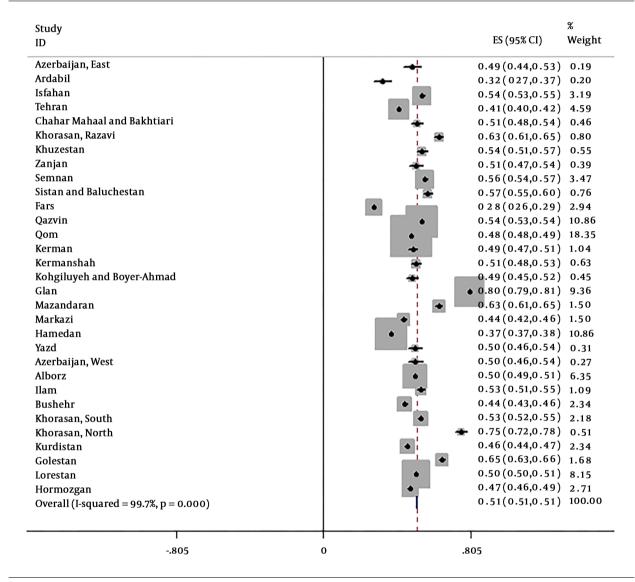
A number of limitations exist in the present investigation that should be noted. First, the sample size for some

able 2. Pooled Prevalence of Road Traffic Accidents According to the Province of Iran, Using the Random Effect Model ^a				
Province	Number of Studies	Prevalence 95% C		
Azerbaijan, East	5	48.50 (43.6 - 53.3)		
Ardabil	2	32.20 (27.4 - 36.9)		
Isfahan	8	53.70 (53.0 - 55.4)		
Tehran	4	41.30 (40.3 - 42.3)		
Sistan and Baluchestan	3	57.10 (54.6 - 59.5)		
Fars	3	27.50 (26.3 - 28.8)		
Kerman	3	48.80 (46.7 - 50.9)		
Kermanshah	3	50.60 (47.9 - 53.3)		
Kohgiluyeh and Boyer-Ahmad	2	48.50 (45.3 - 51.7)		
Guilan	6	79.80 (79.1-80.5)		
Mazandaran	5	63.10 (61.3 - 64.8)		
Markazi	2	43.90 (42.1-45.6)		
Hamedan	3	37.10 (36.5 - 37.8)		
Yazd	2	50.10 (46.3 - 54.0)		
Chahar Mahaal and Bakhtiari	A	51.20 (48.1 - 54.4)		
Khorasan, Razavi	В	63.00 (60.6 - 65.4)		
Khuzestan	С	53.90 (51.0 - 56.8)		
Zanjan	D	50.60 (47.2 - 54.1)		
Semnan	E	55.60 (54.4 - 56.7)		
Qazvin	F	53.80 (53.1 - 54.4)		
Qom	G	48.10 (47.9 - 48.9)		
Azerbaijan, West	н	50.30 (46.2 - 54.4)		
Alborz	I	50.00 (49.1 - 50.8)		
llam	J	53.20 (51.1 - 55.2)		
Bushehr	К	44.50 (43.1 - 45.9)		
Khorasan, South	L	53.10 (51.6 - 54.5)		
Khorasan, North	М	75.20 (72.2 - 78.2)		
Kurdistan	N	45.70 (44.3 - 47.1)		
Golestan	0	64.70 (63.0 - 66.3)		
Lorestan	P	50.40 (49.7 - 51.2)		
Hormozgan	Q	47.40 (46.1 - 48.7)		
Pooled effect	60	51.50 (50.6 - 52.3)		

^aA: 1 study from Chahar Mahaal and Bakhtiari and studies from Isfahan and Khuzestan province. B: 1 study from Khorasan, Razavi, and studies from Semnan and Yazd province. C: 1 study from Khuzestan and studies from Chahar Mahaal Bakhtiari and Kohgiluyeh and Boyer-Ahmad province. D: 1 study from Zanjan and studies from East Azerbaijan and Hamedan province. E: 1 study from Semnan and studies from Tehran, Qom and Mazandaran province. F: 1 study from Qazvin and studies from Zanjan, Guilan, Markazi and Hamedan province. G: 1 study from Qom and studies from Isfahan, Tehran, Semnan and Markazi province. H: studies from East Azerbaijan and Khuzestan province. I: studies from Hara Azerbaijan and Khuzestan province. I: studies from Khazandaran and Markazi province. M: studies from Khuzestan, Fars and Kohgiluyeh and Boyer-Ahmad province. L: studies from Khorasan, Razavi and Semnan province. N: studies from Khorasan, Razavi and Semnan province. N: studies from Khorasan, Razavi and Hamedan province. O: studies from Semnan and Mazandaran province. P: studies from Isfahan, Kermanshah, Markazi and Hamedan province. Q: studies from Sistan and Baluchestan, Fars and Kerman province.

of the Iran province was not adequate and the quantity of data varied between provinces. Second, different sample locations (general or special hospital) were utilized in sampling method, which may affect the obtained results of the current systematic review. Lack of published related studies in some provinces and data deficiencies in another one

Table 3. Pooled Prevalence of Road Traffic Accidents During the Time				
Year	Number of Studies	Prevalence 95% CI		
Before year 2000	3	52.20 (50.00 - 54.40)		
2001 - 2005	22	53.30 (52.70 - 54.00)		
2006 - 2010	17	46.90 (45.50 - 48.30)		
After year 2010	14	52.50 (50.10 - 54.90)		



 $\textbf{Figure 2.} \ \textbf{Forest plot of the prevalence of road traffic accidents according to the 31 provinces of Iran$

did not allow us to include them in the final analysis.

In addition, a number of strong points exist in the present study that should be considered. First, the use of the method of interpolation for the province with one or

no study. Second, the use of two-step meta-analysis and map GIS model that tends to have better and more accurate meta-analysis results.

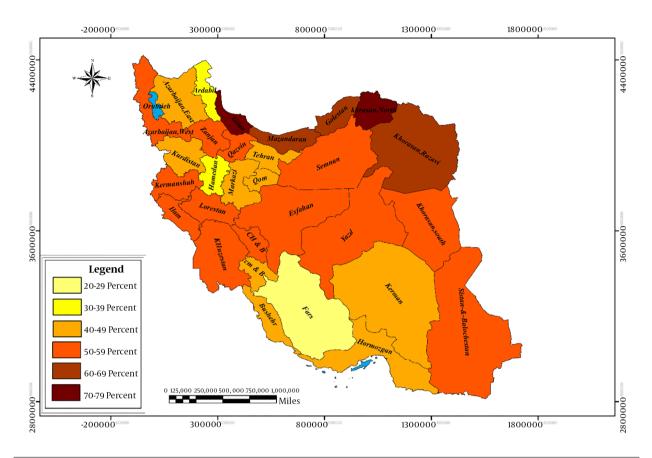
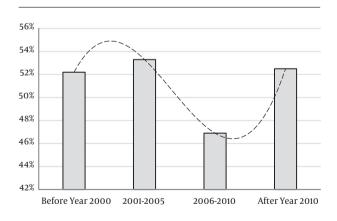


Figure 3. The GIS map of prevalence of road traffic accidents in Iran



 $\textbf{Figure 4.} \ \textbf{Trend of the prevalence of road traffic accidents during the time in Iran}$

5.1. Conclusion

The result showed the prevalence of road traffic accidents decrease from north to south of Iran. In addition, more results showed an increasing trend of the rate of road

traffic accidents in Iran, therefore, the design safety strategy, according to the province and time trend, can be helpful.

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Footnotes

Authors' Contribution: Alireza Najimi-Varzaneh collected the data, analyzed and prepared the draft of the article. Mohammad Gholami Fesharaki is the supervisor of this project.

Conflict of Interests: The authors declare that they have no conflict of interest.

References

- Sar V. Trauma and dissociation in context: Personal life, social process, and public health. *J Trauma Dissociation*. 2008;9(1):1-8. [PubMed: 19042306].
- Azami-Aghdash S, Sadeghi-Bazargani H, Shabaninejad H, Abolghasem Gorji H. Injury epidemiology in Iran: A systematic review. *J Inj Violence Res*. 2017;9(1). doi: 10.5249/jivr.v9i1.852. [PubMed: 28039683]. [PubMed Central: PMC5279990].
- 3. Naghavi M, Abolhassani F, Pourmalek F, Lakeh M, Jafari N, Vaseghi S, et al. The burden of disease and injury in Iran 2003. *Popul Health Metr.* 2009;7:9. doi: 10.1186/1478-7954-7-9. [PubMed: 19527516]. [PubMed Central: PMC2711041].
- 4. Alizadeh A, Zare M, Darparesh M, Mohseni S, Soleimani-Ahmadi M. GIS based analysis of intercity fatal road traffic accidents in Iran. *J Med Life*. 2015;8(Spec Iss 2):77–82. [PubMed: 28255402]. [PubMed Central: PMC5327713].
- Pfeifer R, Teuben M, Andruszkow H, Barkatali BM, Pape HC. Mortality patterns in patients with multiple trauma: A systematic review of autopsy studies. *PLoS One*. 2016;11(2). e0148844. doi: 10.1371/journal.pone.0148844. [PubMed: 26871937]. [PubMed Central: PMC4752312].
- Bergel-Hayat R, Debbarh M, Antoniou C, Yannis G. Explaining the road accident risk: Weather effects. Accid Anal Prev. 2013;60:456-65. doi: 10.1016/j.aap.2013.03.006. [PubMed: 23928504].
- Rangel T, Vassallo JM, Herraiz I. The influence of economic incentives linked to road safety indicators on accidents: The case of toll concessions in Spain. *Accid Anal Prev.* 2013;59:529-36. doi: 10.1016/j.aap.2013.07.014. [PubMed: 23954687].
- 8. Moher D, Shamseer L, Clarke M, Ghersi D, Liberati A, Petticrew M, et al. Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015 statement. *Syst Rev.* 2015;**4**:1. doi: 10.1186/2046-4053-4-1. [PubMed: 25554246]. [PubMed Central: PMC4320440].
- Salehi-Vaziri M, Sadeghi F, Almasi Hashiani A, Gholami Fesharaki M, Alavian SM. Hepatitis B virus infection in the general population of Iran: An updated systematic review and meta-analysis. *Hepat Mon*. 2016;16(4). e35577. doi: 10.5812/hepatmon.35577. [PubMed: 27257428]. [PubMed Central: PMC4888501].
- Khorshidi A, Ainy E, Hashemi Nazari SS, Soori H. Temporal patterns of road traffic injuries in Iran. *Arch Trauma Res.* 2016;5(2). e27894. doi: 10.5812/atr.27894. [PubMed: 27703958]. [PubMed Central: PMC5037288]
- Rasouli MR, Saadat S, Haddadi M, Gooya MM, Afsari M, Rahimi-Movaghar V. Epidemiology of injuries and poisonings in emergency departments in Iran. *Public Health*. 2011;125(10):727-33. doi: 10.1016/j.puhe.2011.07.006. [PubMed: 21906762].
- Sadeghi-Bazargani H, Azami-Aghdash S, Ziapour B, Deljavan R. Trauma-related therapeutic procedures at shohada trauma center in Tabriz. *Trauma Mon.* 2013;17(4):389–92. doi: 10.5812/traumamon.7737. [PubMed: 24350134]. [PubMed Central: PMC3860659].
- Navali AM, Pouyandeh F. Traffic accident injuries in a referral orthopedic hospital in North West of Iran during summer 2009. J Anal Res Clin Med. 2015;3(1):62-7. doi: 10.15171/jarcm.2015.010.
- 14. Samadi Rad B, Babai Ghazani A, EftekharSadat B, Mamaghani V, Baybourdi B, Shakuri SK, et al. [Study of frequency of peripheral nerve injuries in traumatic patients referred to Eeast Azarbaijan legal medicine center in 2011]. Sci J Forensic Med. 2016;21(4):283–90. Persian.
- Sadeghi-Bazargani H, Samadirad B, Moslemi F. A decade of road traffic fatalities among the elderly in North-West Iran. BMC Public Health.
 2018;18(1):111. doi: 10.1186/s12889-017-4976-2. [PubMed: 29310628]. [PubMed Central: PMC5759218].
- 16. Dadashzadeh A, Dehghannejhad J, Shams S, Sadegi H, Hassanzadeh F, Soheili A, et al. [Situation of response and transport time in prehospital traumatic patients from scene to hospital in Tabriz-Iran]. J Urmia Nurs Midwifery Fac. 2016;14(8):728–37. Persian.

- Amani F, Habibzadeh S, Rostami K. [Specifications of traumatized patients referring to Fatemi Hospital of Ardabil, 2007-8]. J Ardabil Univ Med Sci. 2009;9(1):13-22. Persian.
- Farzaneh E, Fattahzadeh-Ardalani G, Abbasi V, Kahnamouei-Aghdam F, Molaei B, Iziy E, et al. The epidemiology of hospital-referred head injury in Ardabil city. Emerg Med Int. 2017;2017;1439486. doi: 10.1155/2017/1439486. [PubMed: 28255457]. [PubMed Central: PMC5309429].
- 19. Fakharian E, Taghaddosi M, Masoud SA. [Epidemiology of head trauma in Kashan]. Feyz | Kashan Univ Med Sci. 2003;7(1):64-70. Persian.
- Farzandipour M, Ghatan H, Mazrouei L, Nejati M, Agha Bagheri T. [Epidemiological study of traumatic patients referred to Neghavi Hospital of Kashan]. J Kermanshah Univ Med Sci. 2007;11(1):58-68. Persian.
- 21. Shafiei E, Nademi A, Fakharian E, Omidi A. [An artificial neural network comparison with logistic regression in predicting post-traumatic mental disorders in mild brain injury patients]. *Thoughts Behav Clin Psychol.* 2017;12(46):37–46. Persian.
- 22. Fazel. M. R., Tabesh H., Azordegan F. [Epidemiological study on injuries in Kashan form 1383 to 1385]. Feyz J Kashan Univ Med Sci. 2008;11(5):28–
- 23. Saberi HR, Motalebi M, Hanani M, Akbari H. [Epidemiology of occupational injuries in Kashan during 2005-2006]. *Feyz J Kashan Univ Med Sci.* 2008;**11**(5):32–7. Persian.
- 24. Davoodabadi A, Yazdani A, Sayyah M, Mirzadeh Javaheri M. [Trauma epidemiology and its consequences in victims referred to Kashan Trauma Center during 2007-8]. Feyz J Kashan Univ Med Sc. 2011;14(5):500-5. Persian.
- Fazel MR, Fakharian E, Mahdian M, Mohammadzadeh M, Salehfard L, Ramezani M. Demographic profiles of adult trauma during a 5 year period (2007-2011) in Kashan, IR Iran. Arch Trauma Res. 2012;1(2):63-6. doi: 10.5812/atr.6770. [PubMed: 24396745]. [PubMed Central: PMC3876531].
- Adib-Hajbaghery M, Maghaminejad F. Epidemiology of patients with multiple trauma and the quality of their prehospital respiration management in Kashan, Iran: Six months assessment. Arch Trauma Res. 2014;3(2). e17150. doi: 10.5812/atr.17150. [PubMed: 25147774]. [PubMed Central: PMC4139695].
- 27. Khatami SM, Kalantar Motamedi MH, Tarighi P, Rezai Y, Bakhshandeh H, Shakiba M, et al. [Epidemiology of trauma baqiatallah hospital: A one-year prospective study]. *J Mil Med.* 2003;5(1):13-9. Persian.
- Zargar M, Modaghegh MH, Rezaishiraz H. Urban injuries in Tehran: Demography of trauma patients and evaluation of trauma care. *Injury*. 2001;32(8):613–7. doi: 10.1016/S0020-1383(01)00029-8. [PubMed: 11587698].
- 29. Hatamabadi HR, Setayesh A, Moradi Lakeh M. [Outcome evaluation of traumatic patients in Hazrat Rasoul Hospital]. *Razi J Med Sci.* 2005;12(48):83–90. Persian.
- 30. Ali Asghar Zadeh B, Sadri A, Najari F. Pre-hospital causes of accidents in emergency patients of Shohada Hospital from September 2008 to October 2009. *J Med Council Iran*. 2011;**29**(3):230–6.
- 31. Najari F, Mostafazadeh B. The study of brain death in Chaharmahal and Bakhtiari province in Iran from 2003 to 2013. *Int J Epidemiol Res.* 2015;2(2):88–98.
- Afzal Aghaee M, Rahmanifar F. [Factors related to organ donation from brain dead patients in teaching hospitals of mashhad university of medical sciences during 1392-1385]. Med J Mashhad Univ Med Sci. 2016;59(3):148-54. Persian.
- Salimi J, Zareei MR. [Trauma: An epidemiological study from a single institute in Ahvaz, Iran]. Payaesh. 2008;7(2):115–20. Persian.
- 34. Hatami R, Jafari N, Akbari PA, Kazemzadeh R, Haji Agha Mohammadi P, Aali A. [Causes of injuries in adolescents (15-19 years old) referring to Emergency Ddepartment of Zanjan Shafiye Hospital]. *J Health Nurs Ardabil Nurs Midwifery Fac.* 2009;**12**(48):24-7. Persian.
- Khosravi A, Ebrahimi H. [To evaluate the outcomes of patients with truma admitted to the Imam Hossein Hospital, shahrood using the trauma and injury severity score (TRISS)]. Iran J Epidemiol. 2008;4(2):35-41. Persian.

- Chardoli M, Rahimi-Movaghar V. Analysis of trauma outcome at a university hospital in Zahedan, Iran using the TRISS method. East Afr Med
 J. 2006;83(8):440–2. doi: 10.4314/eamj.v83i8.9458. [PubMed: 17153657].
- Ansari-Moghaddam A, Martiniuk AL, Mohammadi M, Rad M, Sargazi F, Sheykhzadeh K, et al. The pattern of injury and poisoning in South East Iran. BMC Int Health Hum Rights. 2012;12:17. doi: 10.1186/1472-698X-12-17. [PubMed: 22958398]. [PubMed Central: PMC3492065].
- 38. Heydarikhayat N, Rezaee Hematabadi MA, Rasouli D, Kalbali A. [The relation of shock index (Si) and revised trauma score (Rts) with trauma patients mortality after first 24 hours of admission at Khatam-al Anbia Hospital in Iranshahr]. J Urmia Nurs Midwifery Fac. 2012;10(4):621–9. Persian.
- Soroush AR, Shahram GS, Rambod M, Malek-Hosseini SA, Nick-Eghbal S, Khaji A. Pattern of injury in Shiraz. Chin J Traumatol (English Edition). 2008;11(1):8-12. doi: 10.1016/s1008-1275(08)60002-4.
- Heydari ST, Maharlouei N, Foroutan A, Sarikhani Y, Ghaffarpasand F, Hedjazi A, et al. Fatal motorcycle accidents in Fars province, Iran: A community-based survey. *Chin J Traumatol.* 2012;15(4):222-7. [PubMed: 22863339].
- Abbasi HR, Mousavi SM, Taheri Akerdi A, Niakan MH, Bolandparvaz S, Paydar S. Pattern of traumatic injuries and injury severity score in a major trauma center in Shiraz, Southern Iran. Bull Emerg Trauma. 2013;1(2):81-5. [PubMed: 27162829]. [PubMed Central: PMC4771228].
- 42. Kiaei M, Kiaei SS, Tabatabaei S, Kalhor R. [A Survey of wounded motor vehicle passengers and riders at Shahid Rajaei Educational Health care Center in Qazvin]. J Health Adm. 2005;8(19):62-6. Persian.
- Karami Joushin M, Saghafipour A, Noroozi M, Soori H, Khedmati Morasae E. Epidemiology of accidents and traumas in Qom province in 2010. Arch Trauma Res. 2013;2(3):113-7. doi: 10.5812/atr.8382. [PubMed: 24693520]. [PubMed Central: PMC3950913].
- 44. Rezaeinasab M, Iran Manesh F, Broumand Sani M. [The six-month evaluation of thoracic trauma in patients admitted to Ali Ibn Abitaleb Teaching Hospital, Rafsanjan, in year 1999]. *J Rafsanjan Univ Med Sci.* 2005;4(4):242–7. Persian.
- 45. Shojaee Baghini HS, Nakhaee N. [Epidemiology of injured patients attending emergency wards in Kerman/Iran 2002-3]. *Ṭibb-i lunūb*. 2006;**8**(2):172-7. Persian.
- Beigzadeh A, Naghibzadeh Tahami A, Rezaei H, Bahmanbijari B, Nazarieh M, Seyed Askari SM. Epidemiology of trauma in Shahid Bahonar Hospital in Kerman. J Emerg Pract Trauma. 2015;2(2):33-6. doi: 10.15171/jept.2015.16.
- Hessami MA, Fakhri M. [The study of the patients with thorax injury in Kermanshah Truma Center (2002-5)]. J Kermanshah Univ Med Sci. 2008;12(2). Persian. e80090.
- Karbakhsh M, Zandi NS, Rouzrokh M, Zarei MR. Injury epidemiology in Kermanshah: The National Trauma Project in Islamic Republic of Iran. East Mediterr Health J. 2009;15(1):57-64. doi: 10.26719/2009.15.1.57. [PubMed: 19469427].
- Jalalvandi F, Arasteh P, Safari Faramani R, Esmaeilivand M. Epidemiology of pediatric trauma and its patterns in Western Iran:
 A hospital based experience. Glob J Health Sci. 2015;8(6):139–46.
 doi: 10.5539/gjhs.v8n6p139. [PubMed: 26755468]. [PubMed Central: PMC4954915].
- 50. Hatamipoor E, Afshoun E, Jalili Y. [Death causes in door-patients in Yasuj 1380]. *Armaghane Danesh*. 2003;**8**(1):9–16. Persian.
- 51. Fararoei M, Javad Sadat SJ, Zoladl M. Epidemiology of trauma in patients admitted to an emergency ward in Yasuj. *Trauma Mon.* 2016;23(3). e30572. doi:10.5812/traumamon.30572.
- Kadkhodaie MH. Three-year review of facial fractures at a teaching hospital in Northern Iran. Br J Oral Maxillofac Surg. 2006;44(3):229–31. doi: 10.1016/j.bjoms.2005.06.016. [PubMed: 16099558].
- Emam Hadi MR, Hatamian HR. [Epidemiological survey of traumatic brain injury in hospitalized patients in Rasht]. J Guilan Univ Med Sci.

- 2005;14(53):63-8. Persian.
- Hemmati H, Chabok SY, Dehnadimoghadam A, Melksari HM, Dafchahi MA, Shabani S. Trauma in Guilan (North of Iran): An epidemiologic study. Acta Medica Iranica. 2009;47(5):403-8.
- Yousefzade Chabok S, Ahmadi Dafchahi M, Mohammadi Maleksari M, Dehnadi Moghadam A, Hemati H, Shabani S. Epidemiology of injuries and their causes among traumatic patients admitted into Poursina Hospital, Rasht (second half of the year 2005). J Kermanshah Univ Med Sci. 2007;11(3). e80625.
- Yousefzade Chabok SH, Safayi M, Hemati H, Mohammadi H, Shabani
 [Epidemiology of head injury in patients who were reffered to Poorsina Hospitall. I Guilan Univ Med Sci. 2008:16(64):112-9. Persian.
- Asadi P, Asadi K, Monsef-Kasmaei V, Zohrevandi B, Kazemnejad-leili E, Kouchakinejad Eramsadati L, et al. Evaluation of frequency of cervical spine injuries in patients with blunt trauma. J Guilan Univ Med Sci. 2015;23(92):31–6.
- Janmohammadi N, Montazeri M, Akbarnezhad E. The Epidemiology of extremity fractures in trauma patients of Shahid Beheshti Hospital, Babol, 2001-2006. *Iran J Emerg Med*. 2014;1(1):34-9.
- Hatamabadi H, Vafaee R, Hadadi M, Abdalvand A, Esnaashari H, Soori H. Epidemiologic study of road traffic injuries by road user type characteristics and road environment in Iran: A community-based approach. *Traffic Inj Prev.* 2012;13(1):61-4. doi: 10.1080/15389588.2011.623201. [PubMed: 22239145].
- Moosazadeh M, Nasehi MM, Mirzajani M, Bahrami MA. [Epidemiological study of traumatic injuries in Emergency Departments of Mazandaran Hospitals, 2010]. J Mazandaran Univ Med Sci. 2013;23(98):144–54.
- Modarres SR, Shokrollahi MH, Yaserian M, Rahimi M, Amani N, Manouchehri A. Epidemiological characteristics of fatal traumatic accidents in Babol, Iran: A hospital-based survey. Bull Emerg Trauma. 2014;2(4):146-50. [PubMed: 27162887]. [PubMed Central: PMC4771289].
- Asadian I, Hadadi K, Montaza SH, Khademloo M, Mirzaii N. [An epidemiological study of head injuries in patients attending Sari Imam Khomeini Hospital, 2013-2014]. J Mazandaran Univ Med Sci. 2015;24(122):207-16. Persian.
- 63. Gol Aghaei F, Rafiee M. [Mechanisms and factors associated with unintentional injuries lead to hospitalization in the Emergency Departments of Markazi province hospitals]. *Iranian J Forensic Med.* 2005;11(2):88–93. Persian.
- 64. Solhi H, Kalantari M, Gudarzi D, Noori GR, Yaghubi AA, Cyrus A, et al. [Epidemiolgical assessment of trauma patients referring to Arak Vali-Asr Hospital]. *Q Sci J Rescue Relief*. 2010;**2**(1). Persian.
- Afzali S, Ghaleheiha A. [An epidemiological study of trauma and its injuries on persons referred to Hamedan Legal Medicine Center since 1381]. Iranian J Forensic Med. 2006;12(2):73-8. Persian.
- 66. Khazaei S, Mazharmanesh S, Khazaei Z, Goodarzi E, Mirmoini R, Mohammadian-Hafshejani A, et al. [An epidemiological study on the incidence of accidents in the Hamadan province during 2009 to 2014]. *Pajouhan Sci J.* 2016;**14**(2):8–16. Persian.
- 67. Khazaei Z, Khazaei S, Valizadeh R, Mazharmanesh S, Mirmoeini R, Mamdohi S, et al. The epidemiology of injuries and accidents in children under one year of age, during (2009-2016) in Hamadan province, Iran. *Int J Pediat*. 2016;4(7):2213-20.
- 68. Panahi F, Khoshmohabat H, Taghipour HR, Firoozabadi NH, Moharamzad Y, Abbasi AR. [Causes and severity of fatal injuries in autopsies of victims of fatal traffic accidents]. *J Shahid Sadoughi Univ Med Sci.* 2010;17(5):358–64. Persian.
- Ezoddini Ardakani F, Nafisi Moghadam R, Chavoshian M, Hashemian Z. [Relative frequency of maxillofacial fracture in CT-scan radiographs in Shahid Sadoghi and Shahid Rahnemoun Emergency Departments in Yazd from 2007 till 2010]. Sci Med Univ Sadoughi Shahid J. 2012;19(6):821-30. Persian.

Table 1. Characteristics of the Included Road Traffic Accidents Epidemiology Articles in Iran

Province	Year of Study	Year of Publish	Mean Age	Male Percent	Study Sample Size (No. Trauma Accident)	Prevalence of Trauma Accident and 95% CI
Azerbaijan, East						
Sadeghi-Bazargani (12)	2007	2013	31	77	19530 (12500)	64 (63 - 65)
Navali (13)	2009	2015	32	77	16681 (3246)	19 (19 - 20)
Samadi Rad (14)	2011	2016	37	83	174 (83)	48 (40 - 55)
Sadeghi-Bazargani (15)	2011	2018	75	75	9435 (1375)	15 (14 - 15)
Dadashzadeh (16)	2014	2016	36	76	5614 (4092)	73 (72 - 74)
Ardabil						
Amani (17)	2007 - 2008	2009	29	70	951 (102)	11 (9 - 13)
Farzaneh (18)	2013 - 2014	2017	23	85	85 (204)	42 (36 - 48)
Isfahan						
Fakharian (19)	1996	2003	26	73	912 (452)	50 (46 - 53)
Farzandipour (20)	2004	2007	28	61	6415 (3049)	48 (46 - 49)
Shafiei (21)	2004	2017	27	74	4290 (2930)	68 (67 - 70)
Fazel (22)	2004 - 2006	2008	29	77	18166 (9173)	50 (50 - 51)
Saberi (23)	2005	2008	29	69	18166 (9173)	50 (50 - 51)
Davoodabadi (24)	2007-2008	2011	26	66	1004 (502)	50 (47 - 53)
Fazel (25)	2009	2012	33	75	22564 (13628)	60 (60 - 61)
Adib-Hajbaghery (26)	2012	2014	47	75	400 (349)	87 (84 - 91)
Tehran			•		(/	(* - /
Khatami (27)	2000	2003	29	89	1393 (515)	37 (34 - 40)
Zargar (28)	2001	2001	27	75	58013 (26105)	45 (45 - 45)
Hatamabadi (29)	2003	2005	30	76	2003 (783)	39 (37 - 41)
Ali Asghar Zadeh (30)	2008 - 2009	2011	31	73	2623 (1127)	43 (41 - 45)
Chahar Mahaal and Bakhtiari	2008-2009	2011	Ji	73	2023 (1127)	43 (41-43)
Najari (31)	2003 - 2013	2015	31	64	95 (42)	44 (34 - 54)
Khorasan, Razavi						
Afzal Aghaee (32)	2009	2016	31	71	658 (472)	72 (68 - 75)
Khuzestan					,	, ,
Salimi (33)	2001	2008	N	71	1141 (673)	59 (56 - 62)
Zanjan					,	
Hatami (34)	2006	2009	17	81	378 (279)	74 (69 - 78)
Semnan	2000	2003		0.	370 (273)	71(03 70)
Khosravi (35)	2004	2008	35	79	220 (176)	80 (75 - 85)
Sistan and Baluchestan					. (,	(
Chardoli (36)	1997	2006	23	82	768 (456)	59 (56 - 63)
Ansari-Moghaddam (37)	2007	2012	37	81	18155 (5713)	31 (31 - 32)
Heydari Khayat (38)	2011	2012	27	91	240 (178)	74 (69 - 80)
Fars			•		· · · /	
Soroush (39)	2002	2008	33	65	1765 (941)	53 (51 - 56)
Heydari (40)	2009	2012	31	97	2345 (542)	23 (21 - 25)
Abbasi (41)	2009	2013	27	76	1217 (278)	23 (20 - 25)
Qazvin					. (=,=)	= (== ==)
Kiaei (42)	2004	2005	25	88	1286 (203)	16 (14 - 18)
Qom					(205)	(** **)
Karami Joushin (43)	2010	2013	42	N	29426 (3535)	12 (12 - 12)
Kerman	2310	2010	**	.,	23.22 (3333)	(12 12)
11011						

Shojaee Baghini (45)	2002	2006	25	76	4085 (1494)	37 (35 - 38)
Beigzadeh (46)	2014	2016	20	77	10161 (5054)	50 (49 - 51)
Kermanshah						
Hessami (47)	2002-2005	2008	41	87	630 (330)	52 (48 - 56)
Karbakhsh (48)	2004	2009	35	79	799 (482)	60 (57 - 64)
Jalalvandi (49)	2009	2015	N	59	304 (50)	16 (12 - 21)
Kohgiluyeh and Boyer-Ahmad						
Hatamipoor (50)	2002	2003	N	85	227 (51)	22 (17 - 28)
Fararoei (51)	2011	2017	28	68	583 (387)	66 (63 - 70)
Guilan						
Kadkhodaie (52)	2002	2006	25	99	7200 (6552)	91 (90 - 92)
Emam Hadi (53)	2004	2005	20	79	715 (641)	90 (87 - 92)
Hemmati (54)	2005	2009	32	72	3598 (3035)	84 (83 - 86)
Yousefzadeh (55)	2005	2007	34	72	1141 (848)	74 (72 - 77)
Yousefzadeh (56)	2005	2008	31	98	3396 (2614)	77 (76 - 78)
Asadi (57)	2011	2015	40	84	6235 (4302)	69 (68 - 70)
Mazandaran						
Janmohammadi (58)	2001 - 2006	2014	34	76	3507 (2372)	68 (66 - 69)
Hatamabadi (59)	2008	2012	34	71	433 (245)	57 (52 - 61)
Moosazadeh (60)	2010	2013	30	72	58750 (23382)	40 (39 - 40)
Modarres (61)	2012	2014	46	83	11393 (10025)	88 (87 - 89)
Asadian (62)	2013	2015	19	68	1304 (980)	75 (73 - 77)
Markazi						
Gol Aghaei (63)	2002	2005	35	80	8856 (3940)	44 (43 - 46)
Solhi (64)	2006	2010	32	74	813 (351)	43 (40 - 47)
Hamedan						
Afzali (65)	2002	2006	31	76	9828 (2130)	22 (21 - 22)
Khazaei (66)	2009 - 2014	2016	30	73	135925 (29604)	22 (22 - 22)
Khazaei (67)	2012	2016	7	74	3200 (2112)	66 (64 - 68)
Yazd						
Taghipour (68)	2005	2010	34	81	251 (100)	40 (34 - 46)
Ezoddini Ardakani (69)	2008	2012	25	86	372 (219)	59 (54 - 64)
Iran						
Khorshidi (10)	2011	2016	23	78	452192 (234239)	52 (52 - 52)
Rasouli (11)	2011	2011	33	73	2991624 (954328)	32 (32 - 32)