Duration: examination 41.4% <2 min, 41.4% 2-5 min. In 20.7%, the procedure was changed due to the examination. Assessability and visualization were rated 2 (1 very good - 6 poor). Half of the users considered themselves experienced.
Conclusion: Ultrasound examinations under medical service conditions at an MGE were feasible and accessible. The majority of examinations concerned the abdomen. US protocols were only used in half of the cases. The duration of the examination was usually less than 5 minutes, and the procedure was changed further by the examination in 20.6% of cases. Since there is supposed to be a large amount of extremities trauma in festival visitors, this percentage might be even higher when (in fracture and joint ultrasound) trained emergency physicians are in charge. Data collection will continue.

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Careful Planning and Preparedness for Mass-Gathering Events to Decrease Burden on Health Care Facilities

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Introduction: Fleadh Cheoil na hÉireann is an annual music festival showcasing Irish culture and artistic expression. Wexford Town (Pop 30,000) hosted the first Wexford Festival from August 4- 11, 2024, with an estimated 650,000 people visiting to enjoy the festivities. Although this mass-gathering event (MGE) presented significant socioeconomic benefits locally, there were concerns about the potential burden additional populations would place on local health care services at Wexford General Hospital (WGH), which was still recovering from fire damage.
Methods: A retrospective audit of the WGH emergency department (ED) over three months covering this period was performed to determine what effect (if any) this event had on local healthcare services. Generic attendance data were retrieved from automated daily reports for analysis and compared to periods before, during, and after the event.
Results: 14,161 patients presented to WGH ED during July, August, and September 2024. The highest monthly attendance (4957) was presented during the pre-event season in July (35.0%). 4638 (32.7%) patients presented in August during the Fleadh, and 4566 (32.2%) patients presented post-event month. The number of attendances arriving by ambulance to the ED increased by 25.53%, and ambulance presentations increased by 9.96% from July to August.
Conclusion: This MGE did not result in an expected increase in patient attendances to the local ED; however, there was an increased burden on ambulance services due to travel logistics, tourists unaware of the facility's location, and generic road closures. Because WGH was situated near the Fleadh (3.3km), there were greater traffic restrictions in the area as ambulances were the only permitted form of transfer for patients from the Fleadh medical team to WGH. Traffic restrictions are a necessary safety measure to mitigate risks of road trauma at MGEs, but this could be adapted more efficiently in preparation for the next Fleadh in 2025.

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Legacy in Mass Gatherings Medicine

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Summary: Mass gatherings present unique challenges and opportunities for public health systems. Effectively managing these events ensures attendees' safety and well-being and contributes to a lasting public health legacy by strengthening health systems and enhancing global health security. The evolution and activities of Mass Gathering Medicine are examined through the lens of an annual gathering of millions: the Hajj. By effectively addressing the health challenges associated with mass gatherings, host nations can transform these events into opportunities to strengthen health infrastructures, promote international collaboration, and leave an enduring public health legacy.

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