

Frostbite

Alaska, Denali, West Buttress

On May 27, a 53-year-old male, climbing solo, sustained frostbite injuries to all ten of his fingers while ascending from the 14,200-foot camp toward the 17,200-foot camp on the West Buttress. At 9:10 a.m., he made a satelite phone call requesting a rescue. Poor satellite connection prevented any further information from being relayed until 1:45 p.m., when an FRS radio call reached mountaineering ranger Dan Corn at 14,200-foot camp. A climbing party reported passing a non-ambulatory climber with frostbitten fingers lying in a sleeping bag at 16,800 feet.

While the NPS patrol began ascending toward the injured patient's location, Corn learned that climbers Jay Claus and Hans Seeger had begun to lower the patient from Washburn's Thumb, a prominent rock formation along the upper West Buttress. Mountain guides Travis Baldwin, Michael Gardner, and Sebastian Grau assisted with the lowering operation until they rendezvoused with the NPS team at 14,800 feet. The patient was evacuated to 14,200-foot camp, where he was further assessed and received treatment for frostbite in the NPS medical tent.

While waiting for the weather to clear for a helicopter evacuation, Corn and Erickson consulted with frostbite experts at the University of Utah, who recommended prompt thrombolytic therapy (medication for eliminating blood clots). At 8:30 p.m., the patient was flown from 14,200-foot camp directly to the airport in Palmer and transferred to the regional hospital by ambulance.

ANALYSIS

To prevent frostbite, adequate clothing for the prevailing conditions must be worn, and clothing layers that get wet (especially gloves and socks) should be changed fordry layers as soon as practical. It is paramount to actively rewarm any body part(s) that becomes cold and numb, not only to prevent more serious injury but also to accurately assess the severity of injuries. Cold extremities should be rewarmed through skin-to-skin contact; in arctic conditions, frostbit areas likely will not rewarm with exercise alone. (Once rewarmed, frostbitten tissue must not be allowed to refreeze, as this will increase the severity of injury.) When circumstances prevent the rewarming of cooled body parts, climbers must seek shelter or descend to a more hospitable location to prevent the worsening of the injury. (Source: Denali Mountaineering Rangers.)

ADDITIONAL FROSTBITE INCIDENTS: Two more frostbite incidents, involving three patients, required helicopter evacuations from the 14,200-foot camp during the 2017 season. On June 12, a 26-year-old male requested assistance at the medical tent after bivouacking on Denali's summit the night before and suffering deep frostbite injuries to multiple fingers and toes. The climber was treated for frostbite and significant dehydration before being flown out on June 13. Two days later, two climbers from the same team (male, 23 and 27) descended to 14,200-foot camp following a summit attempt the day prior, during which they had frostbit their hands while traversing below Denali Pass. The 23-year-old patient was also exhibiting signs and symptoms indicative of snow blindness. Both climbers were treated overnight and evacuated the next morning via the NPS helicopter. (Source: Denali Mountaineering Rangers.)

Images

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