

Academic Emergency Medicine Editor-in-Chief Pick of the Month

The Present-Day Heart of Darkness

In Joseph Conrad's tale, *Heart of Darkness*, the ship captain Marlow sees a map of the Congo River as "resembling an immense snake uncoiled," and that the image fascinated him like "a snake does a bird." The protagonist is captivated by the "blank spaces on the map." There is no better metaphor than that offered by Conrad to introduce this month's POTM, in which [Koltiso, et al.](#) validate clinical criteria to shine light into the darkness. An editorial by topic expert [Chisholm-Straker](#) accompanies the article.

Like the bird drawn to the snake, vulnerable populations — especially children — can be drawn to pure evil. Just as Marlow was drawn to the blank spaces, physicians are compelled to help address the crisis of human trafficking.

Most physicians have an innate desire to protect. This desire can evoke strong emotions when it comes to the raw exploitation of human trafficking. But strong emotions won't solve the problem; instead, the solution lies in an organized process that includes science and instinct. Screening for human trafficking equals the needle in the haystack challenge: difficult but not impossible. The exact prevalence of human trafficking of adults or children in emergency department patients in the United States remains unknown, but there is a 100 percent probability that the prevalence is not zero, and it may be as high as five percent, as it was in the emergency department studied in this month's POTM. However, comprehensive screening and referral for human trafficking could overload already fragile systems, especially in the current context of "everybody wanting to screen for everything at triage." Thus, a short (six item) questionnaire that has a sensitivity of 90 percent and specificity of 50 percent suggests feasibility, but also shows the reality. Screening for human trafficking will be an imperfect science; the "number needed to catch" will be in the 30-50 range. Many non-trafficked children will undergo unnecessary additional questioning to catch one case. Identifying the trafficked child is the start. Even then,

successful extraction cannot be assured. Our ethical challenge is to decide how much we should offer to save one soul from the heart of darkness.

Best wishes,
Jeffrey A. Kline, MD
Editor-in-Chief, Academic Emergency Medicine