

## Concurrent C: Treatment, Rehabilitation and Disability

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### FACTORS ASSOCIATED WITH FUNCTIONAL OUTCOMES 12 MONTHS AFTER INJURY

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**Background** Injury outcome studies have focused on hospitalised patients with major trauma, such as multiple injuries, and traumatic brain injury. Studies in comprehensive injury populations are rare, despite the fact that a considerable share of total disability may be attributable to patients who have never been hospitalised.

**Aims/Objectives/Purpose** To identify the role of pre-injury socio-demographic and health characteristics, injury and injury-related healthcare in determining 12 month functional outcomes following injury.

**Methods** Study participants were the 2282 in the Prospective Outcomes of Injury Study (POIS) who completed the 12 month interview. Pre-injury information on independent variables potentially predictive of adverse outcomes in the future was obtained from participants at the 3 month interview. The functional outcomes of interest were the five dimensions of the EQ-5D plus a cognitive dimension.

**Results/Outcomes** The percent of participants with adverse outcomes was: mobility 24%; self-care 7%; usual activities 30%; pain or discomfort 52%; anxiety or depression 20%; cognitive: 16%. In multivariable models, factors adversely associated with at least three of the outcomes studied were: being female, aged 45–64, insufficient money, pre-injury disability, two or more prior chronic illnesses, smoking regularly, dislocation or sprains to the spine or upper extremities, and having a relatively severe injury.

**Significance/Contribution to the field** A range of pre-injury socio-demographic factors and pre-injury health status affect risk of adverse outcomes after adjusting for the nature and severity of injury. The latter, however, also have independent effects on the risk of adverse outcomes.