

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.