Long term outcomes 12 years after major trauma

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Abstract

Aim

To provide long term population-based follow up on major trauma patients 12 years after injury.

Methods

This cohort study was based on a stratified random sample of patients with an injury severity score greater than 15 who reached hospital alive in 1990-1991. The patient details were used to trace them and to assess the patients' recovery, using endpoints of current employment status and any current physical or mental health problems. A Glasgow outcome score was allocated on the basis of these replies.

Results

Of 239 patients included in the original tranche, (23.2/100 000), 165 (16/100 000) survived to hospital discharge. 138 (86%) were traced, and 4 patients had left the UK. The Glasgow outcome score was 2.3 for the group traced, indicating a functional outcome of moderate disability.
Survived to hospital discharge. 138 (86%) were traced, and 4 patients had left the country. Patients mean age was 34 (range 2–93). The male to female ratio was approximately 3:1. Twenty-one patients had died since discharge, due to unrelated illnesses. One hundred and five (76%) were living independently (GOS 4 and 5). Eleven patients (8%) were severely disabled, requiring assistance with activities of daily living. One patient remains in a persistent vegetative state. Return to work rates for those working at time of injury (and who remain of employable age) was 90%. The unemployment rate in the study population who are of working age was 34% (pre-injury rate 13%). The unemployment rate for those injured before their 17th birthday is currently 52%.

Conclusion

We now have 12 year population based outcome data for major trauma. Despite major injury, 90% of long term survivors are living independently, with 90% returning to work. There is a trend towards higher unemployment when injured in childhood.

Keywords

Major trauma; Outcomes; Follow up; Population based; Injury severity score; Glasgow outcome score
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