



Service Priorities and Programmes
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Assessment Of Health-Related Quality Of Life (HRQOL) Using SF-36 Over 2 Years Post-Injury In Patients With Moderate And Severe Trauma: A Prospective Multicentre Cohort Study In Hong Kong

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Introduction

In order to improve survival and functional outcome in trauma patients, Hong Kong has designated trauma centers. However, there is very little information on post-injury health-related quality of life (HRQOL) in patients with moderate and major trauma.

Objectives

The objective of this study was to evaluate post-injury HRQOL in patients with moderate and major trauma over two years in Hong Kong.

Methodology

In this multi-centre prospective cohort study the inclusion criteria were: trauma patients admitted to one of three trauma centers, age \geq 18 years, ISS \geq 9, meeting Trauma Registry criteria, surviving to 48 hours. HRQOL was measured by SF36 at 2-years post-injury. Good outcomes were defined as reaching the HK norm i.e. PCS $>$ 52.83 and MCS $>$ 47.18.

Result

From 1st January 2010 to 30th September 2010, 400 patients were recruited (mean age 53.3 years; range 18-106; 70% male; ISS 9-15, N = 139; ISS \geq 16, N = 261). For ISS 9-15, 64/139 (46%) patients were lost to follow up. 32 (23%) patients reached PCS \geq 52.83 and 50 (36%) patients reached MCS \geq 47.18. If all patients lost to follow up had PCS \geq 52.83, then the maximum possible is 32 + 64 = 96 (69%), and for MCS \geq 47.18 the maximum possible is 50 + 64 = 114 (82%). For ISS \geq 16, 110/261 (42%) patients were lost to follow up. 33 (13%) patients reached PCS \geq 52.83 and 65

(25%) patients reached $MCS \geq 47.18$. If all patients lost to follow up had $PCS \geq 52.83$, then the maximum possible is $33 + 110 = 143$ (55%), and for $MCS \geq 47.18$, then the maximum possible is $65 + 110 = 175$ (67%). Conclusion At two years post-injury patients with moderate and major trauma have a 13 to 69% chance of $PCS \geq 52.83$ and a 25 to 82% chance of $MCS \geq 47.18$. Acknowledgement This study was supported by Health and Health Services Research Grant 07080261 and Health and Medical Research Fund Grant 10110251.