Service Priorities and Programmes

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Predicting Probability of Return to Work at One Year after Moderate and Major Trauma in Hong Kong: a prospective, multicentre, cohort study

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Introduction

In order to improve survival and functional outcome in trauma patients, Hong Kong has designated trauma center. However, there is very little published data on trauma patients return to work in Hong Kong.

Objectives

The objective of this study was to provide preliminary data on RTW status for patients in Hong Kong with moderate and major trauma.

Methodology

From 1st January 2010 to 31st December 2011, a multi-centre prospective cohort study of trauma patients was conducted in Hong Kong. Patients admitted to the Prince of Wales Hospital (PWH), Queen Elizabeth Hospital (QEH) and Tuen Mun Hospital (TMH) were recruited, and followed up for 12 months. Patients aged≥18 years with moderate or major trauma (ISS≥9), in a trauma registry were included. The primary outcome was 12-month post-injury RTW.

Result

Of the 400 patients recruited to the study (mean age 53.3 years; range 18-106; 69.5% male), the successful follow up rates at 1, 6- and 12-months was 81.3%, 61.3% and 44.0%. In patients who were employed before injury, RTW was lowest (20.9%) at 1-month and gradually increased to 37.5% at 12-months. Univariate analysis showed that RTW was significantly associated with age <50 years (OR 6.725, p<0.0001), male gender (OR 3.807, p=0.009), one-month PCS (PCS 4Q: OR 3.986, p=0.015) and one-month MCS (MCS 4Q: OR 4.865, p=0.018). After multivariate analysis, age <50 years (OR 9.673, p<0.0001), no abdominal injury (OR 4.457, p=0.029), one-month PCS (PCS 3Q: OR 4.019, p=0.049) and one-month MCS (4Q: OR 5.516, p=0.036) significantly predicted 12 month RTW. Discussion The 12-month

post-trauma RTW rate in patients with ISS≥9was <40%. Younger age, no abdominal injury, higher one-month PCS and one- month MCS scores predicted 12 month RTW.
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