

Surrey Injury Research

University of Surrey

Qualitative insights into patients experiences of injury - The Burden of Injury

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Session: H6- Impacts of Injury

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16.30PM

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Introduction

- **Burden of injury**
 - Quantitative and qualitative
 - 1517 participants across four centres in the UK
 - Swansea , Nottingham, Bristol and Surrey
- **Qualitative**
 - Aim – understand individuals' experience of injury
- **Current literature**
 - Usually one type of injury and/or patient type and/or how the injury occurs
 - Relatively few qualitative research projects

Method

- 89 interviews
 - Bristol, Surrey and Swansea.
- Selected from overall sample of the three areas
 - quota sampling - range of ages, injury severity and time since injury.



Loss of mobility - support

“My husband used to do the housework, my sister used to come twice a week. I had to arrange for friends and neighbours to take me to hospital twice a week and then I would get a taxi back”

(C214:49:F:gastrocnemius tear (sprain) : 23 months: civil servant: IN)

“I just had to stand in the bathroom with nothing on and wait until somebody could come and help”.

(C137:79:F: wrist and leg injury: 25 months : retired: OUT)

“In one pocket I had a mug and in the other pocket I had a thermos flask and in my mouth I was holding a bag with things like boiled eggs, bread and butter and so on and then at one point we noticed that the bag had on it “Help the Aged” (laughing)”

(C269:71:M: fractured ankle : 20 months : retired: OUT)

Emotional Impact

“I’d been extremely fit with a matching pair of knees fulfilling the purpose of knees. Never really regarded them anything other than another aspect of one’s body but the moment that I hit the ground I stayed there for near on half an hour before I could get assistance to actually get up.”

(A311:53:F:dislocated knee:11 months professional horse rider: IN)

“I was in extreme shock for a couple weeks. And I mean because I can’t remember a thing about it. I was, my brain just sort of cut off. But the hospital said that was a good thing anyway.”

(B173:74:F:fractured rib pneumothorax, tibial plateau fracture: 14 months: retired:IN)

Loss of Confidence

Participant: “That was the hardest thing of it the worry of it getting hurt again”

Interviewer: How did you overcome that?

Participant: I think it is more of doing something more often really, your confidence, started playing again and taking hits etc it was fine. As I say I have only got the scars there now.”

(C369:25:M : closed displaced fracture mid shaft tib+ fib : 19 months: PE teacher and Physio in prison service: IN)

“I will be honest it shook my confidence. I was (....) when I did that until then I was very confident but it did sort of shake my confidence I am terrified of falling again....”

(A266: 75 : F : fractured left humerus: 19 months : retired – IN)

Enduring Consequences

“I haven’t got my bit of social life I had (...) Like tonight, I would be out playing badminton tonight, and I would be out playing tomorrow...with my wife and myself, we both played.”

(B256:62:M:fractured left calcaneum:6 months: window cleaner:OUT)

“it was devastating, I mean it has changed my life completely. I haven’t been to town on my own...I mean the bus stop is round the corner of the bungalow, we go part of the way by car but I don’t go out without my husband...I used to run everywhere not walk.”

(C379:71:F:injury to left wrist : 18 months: retired:IN)

“I can’t get back to normal, so normal is something different now. Normal will be going out to friends, jumping in the car and just going; doing odd jobs around the house, always within a reasonable time. That would be normal but now I can’t do that.”

(A139:61:M:fractured hip:16 months:retired:IN)

Personal resilience

“...I just got on with it really ... I don’t want it to hinder me I just wanted to get on with my life really.”

(B188:53:F: fractured dislocated R ankle: 15 months:student manager: IN)

“My own mentality... I think it is more to do with me than anyone else. You know, people used to say don’t be forcing that or what have you, and I was like I know my own body more than anyone else. I know when I am pushing it too much so it is probably more my own mentality as well. I always did push the boundaries, I never sat back and waited, you know.”

(C382:21:M:closed displaced fracture mid shaft left humerus: 19 months: armed forces:IN)

Physiotherapy

“When I did go to the physiotherapy locally [...] if it hadn’t been for that it might you know, I don’t think I’d have ever recovered.”

(B267:76:M:bilateral fracture of ankle:9 months:retired:IN)

“I had a physio...who gave me one piece of advice and that was to let gravity bend my arm as much as it could...and that was the best”.

(B208:59:F:L olecranon fracture:19 months:not working: IN)

“Some more advice from a physio as to some simple exercises to do just to get some mobility back in my ankle and strength back in my leg muscles”

(A213:53:M:fractured left tibia and fibula:17 months: SE painter and decorator:IN)

Financial and employment issues

“I had to have eleven weeks off work because I couldn’t drive. And when I went back to work they had to keep me down on the ground floor because I couldn’t.. go up the steps very easily.”

(B188:53:F: fractured dislocated R ankle: 15 months:student manager: IN)

“Oh a terrible impact. I mean I had to cut my hours down, I can’t work full time. I have lost out on my pension”

(B167:62:F:fractured dislocation of ankle:13 months:IN)

“... I couldn’t work for a month or so but as I’m self-employed I wasn’t getting any money so really I went back to work much sooner than I should have done...”

(A101:61:M: fracture left radius/ulna, abrasion to both knees and facial injury, jaw displaced:19 months: HGV driver:IN)

Information

“... the consultant... he instilled confidence..., you know he kept me fully informed and made sure that I knew what was going on”

(B260:37:M:Multiple trauma:8 months: telephone banker:IN)

“I felt almost that that surgeon didn’t inform us and didn’t give us the choice, didn’t say look this is the situation or get another specialist in earlier and say what’s your advice.So on the surgical side I wasn’t too impressed.”

(A406:13:F:large leg laceration 15x10cms through fascial sheath, 4cm laceration proximal to right knee medial aspect: adipose exposed: 2 months: school student: Mother interviewed:IN)

Overall Impact

“I can’t see a time when I will have completely recovered. That gets vaguely depressing..... It doesn’t matter if I take half the morning to get myself up, I can still manage it and I’m still doing it on my own. It would be lovely to say yes, in six months’ time I’m going to be able to do a nice long walk to the village green and back again. I think a few steps outside is about as much as I’m going to manage.”

(A119:85:F:fractured tibia and fibula: 7 months:retired nurse and carer:IN)

“Well, I’m 71 on Saturday but when that happened I was still able to do most things with the grandchildren and I can’t get on the floor now, I can’t kneel up, there’s lots of things I can’t do that I could do before... if I didn’t have the hip problem whether I’d still be, you feel a lot, a lot older because there are so many things you can’t do you know, but you just got to get on with it, when it’s done it’s done, isn’t it?” (B213:69:F:fractured Neck of Femur: 15 months:retired:IN)



Conclusions

- Support - friends, family and neighbours
- Emotional impact
- Loss of confidence
 - Quality of life
- Physiotherapy
 - Role in facilitating recovery
- Financial issues
 - especially self employed
- Adequate, timely information

Conclusions

- Wide range of participants
 - Different ages
 - Employment status
 - Types of injuries
 - A&E departments
- Importance of social/emotional support
- Importance of information
- Role of physiotherapy