

THE OCCUPATIONAL PERFORMANCE PROFILE, QUALITY OF LIFE AND COMMUNITY REINTEGRATION OF PATIENTS WITH BURN INJURIES POSTDISCHARGE IN THE NORTH WEST PROVINCE, SOUTH AFRICA



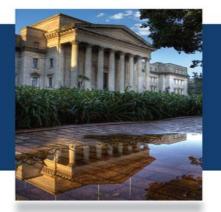




ANNERI MYBURGH MSc OT (Wits)

<u>DENISE FRANZSEN</u> PhD (Wits)





INTRODUCTION

Patients with burn injuries require rehabilitation after discharge from hospital

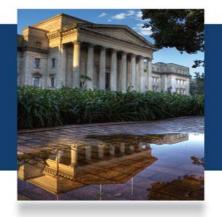
- scar management and mobility
- ability to assume previous lifestyle and roles ¹
- integration into both their home and community life²

Present with decreased health related quality of life³







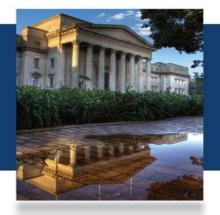


In South Africa

- lack of rehabilitation services at a primary health care level
- majority of patients come from poor socio economic status
- dropout rate from rehabilitation -90% after one year^{4,5}





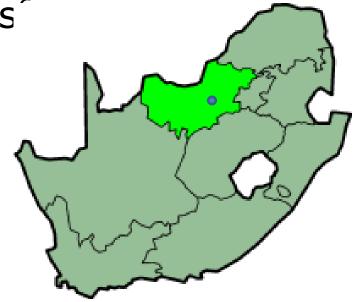


One burns unit in North West Province

an area of 106 512 square kilometers^{*}

a population of 3 509 953

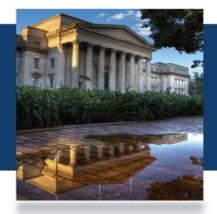
Need to extend rehabilitation services to other sites including at PHC level











PURPOSE AND METHODOLOGY OF THE STUDY

A study to determine the activity limitations and participation restrictions post discharge from the burns unit was completed.

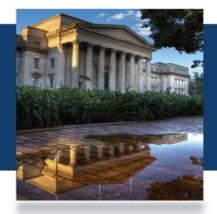
A longitudinal study design

- Performance profiles were established for pre injury, at 1 month and 6 months post discharge
- Community integration and health related quality of life were established 6 months post discharge









RESULTS AND DISCUSSION

55 patients included in the study. 27 remained after 6 months - dropout rate 50.9%

Gender	61% male participants
Age	67% below 40 years of age
Employed	51%
Mean length of stay	46.7 days

Flame burns 48%Partial thickness burns 69%Total body surface area 80% < 20% TBSA Head, upper limbs and trunk 30% of participants 4.5%

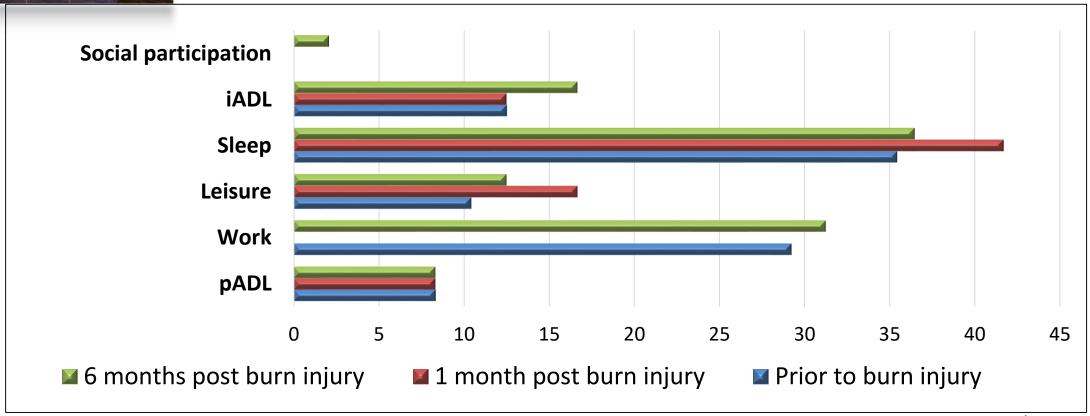








WEEKDAY PERFORMANCE PROFILE



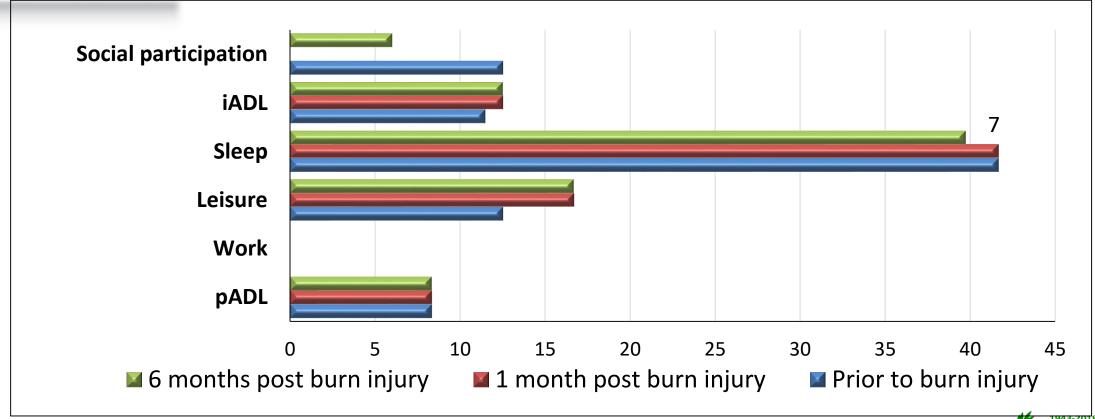








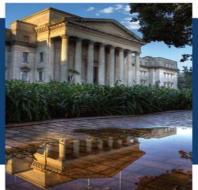
WEEKEND PERFORMANCE PROFILE



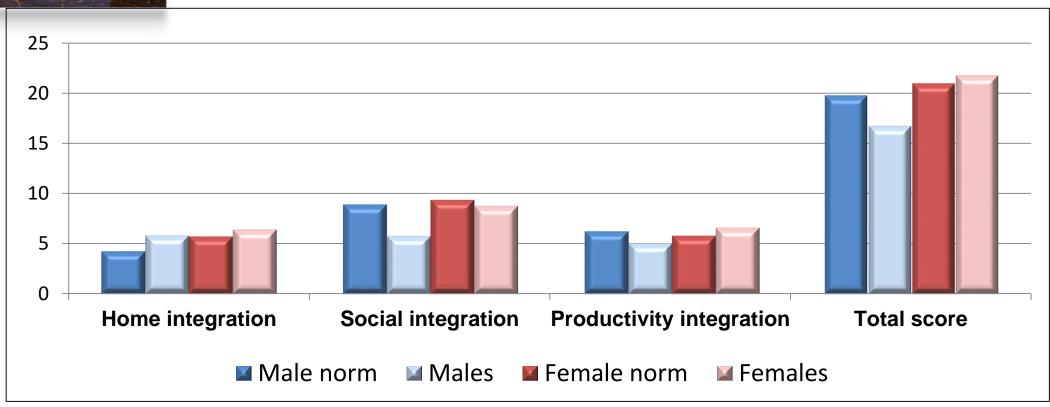








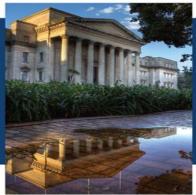
INTEGRATION INTO COMMUNITY 6 MONTHS POST DISCHARGE



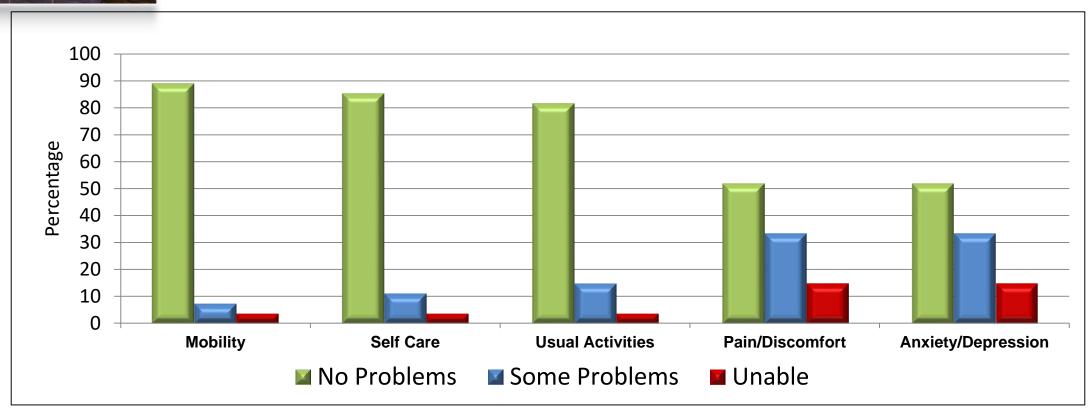








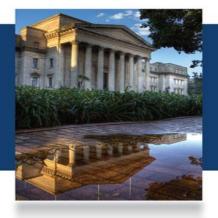
HEALTH RELATED QUALITY OF LIFE 6 MONTHS POST DISCHARGE











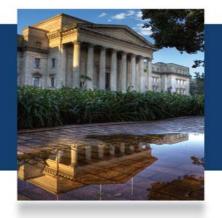
ACCESS TO THERAPY

- distance of the patients' homes from health services
- lack of finances

 strongly associated with poor health related quality of life (r=0.67 - 0.73)







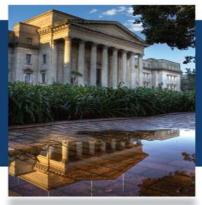
CONCLUSION

Results support

- the recommendations for community based occupational therapy to improve rehabilitation outcomes
- the establishment of support groups for patients with burn injuries in community settings







UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

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