

Patients with acquired brain injury's quality of life change related to return to work

a population-based register study



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Background

- 45-50 000
- 5 000 working age
- Reduced mental health and quality of life
- No population-level data has been reported on RTW and QoL over time



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Aim

This study investigated changes in QoL in relation to RTW among patients with ABI.



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Method

- WebRehab Sweden – Quality register est 1998
- 23 clinics register data
- Longitudinal:
 - 1) admission
 - 2) discharge
 - 3) follow-up (1 year)
- QoL measure - EuroQol EQ-5D questionnaire
- QoL change from discharge – follow up
- EQ-VAS and EQ5D Index



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Method

- Inclusion criterion:
 - 1) Admission – work at least 50%
 - 2) Discharge - not working at all
- Linear and multiple regression analysis in SPSS

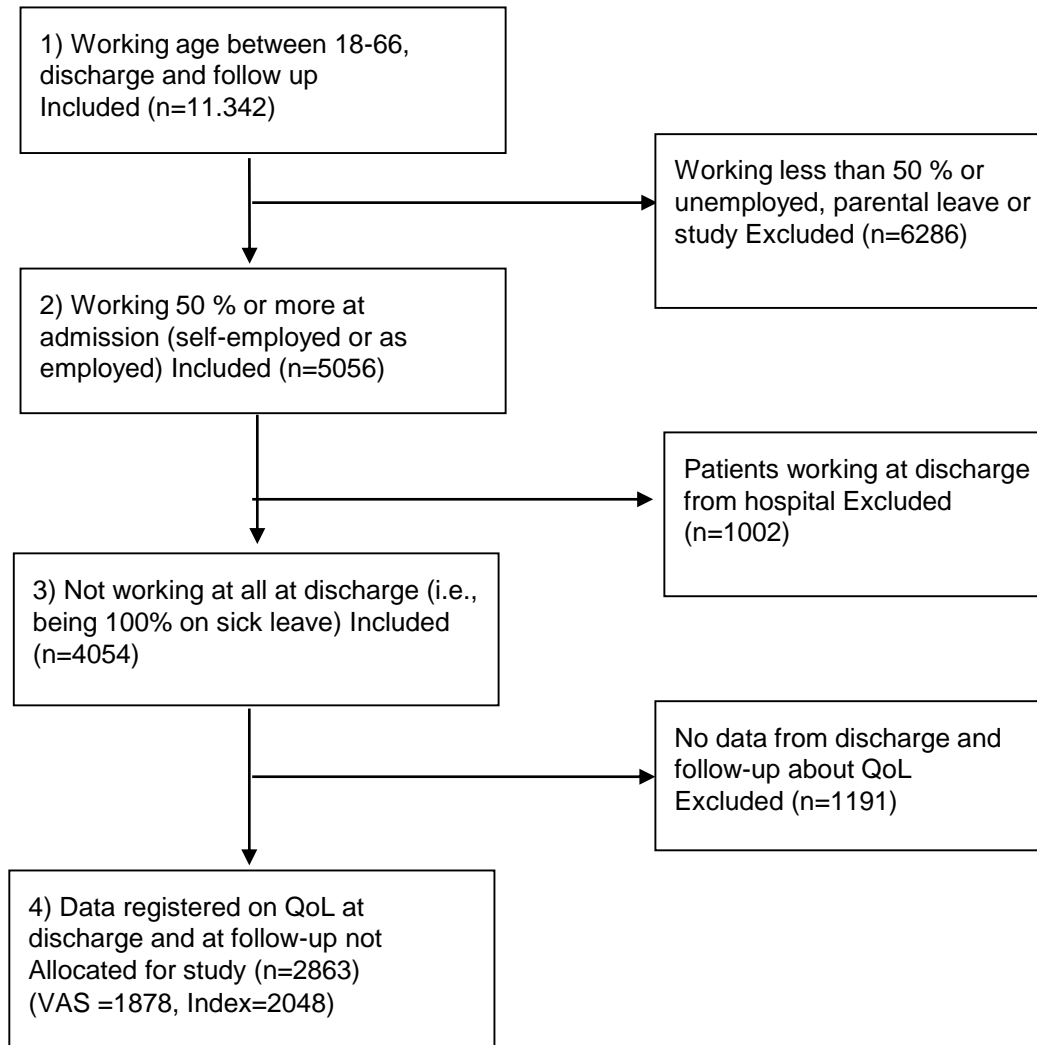


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Flow diagram



Characteristics of the sample

- 1487 patients with (Index and VAS)
- 63 % men
- 18–66 years (mean age 52)
- 76 % stroke
- 35 % University degree
- 22 % good recovery - GOSE
- 46 % Drivers license reinstated



Results

- Return to work (570, 38% RTW)
- Improved functioning – GOSE
- Education level – University degree
- Drivers license reinstated

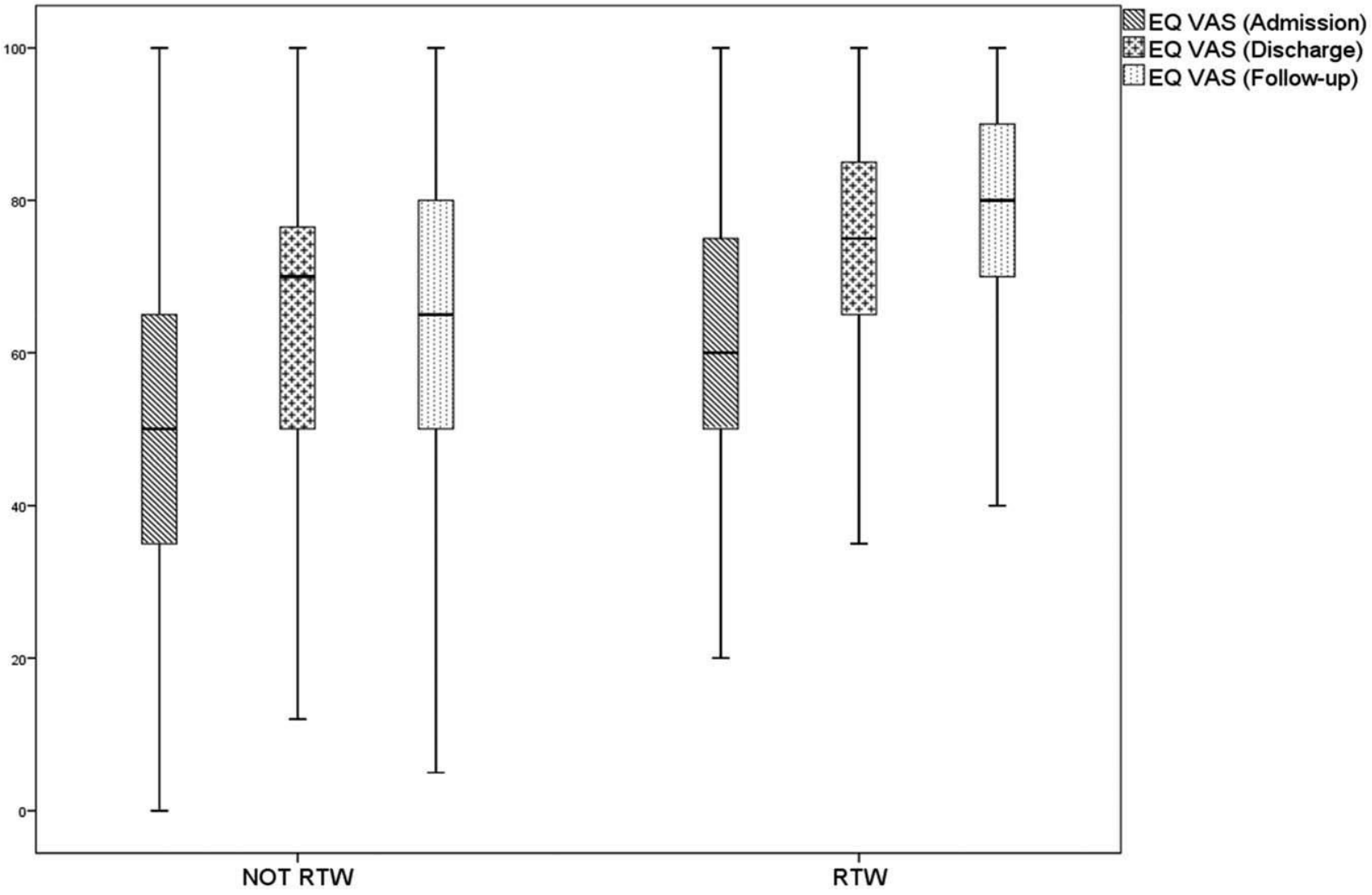


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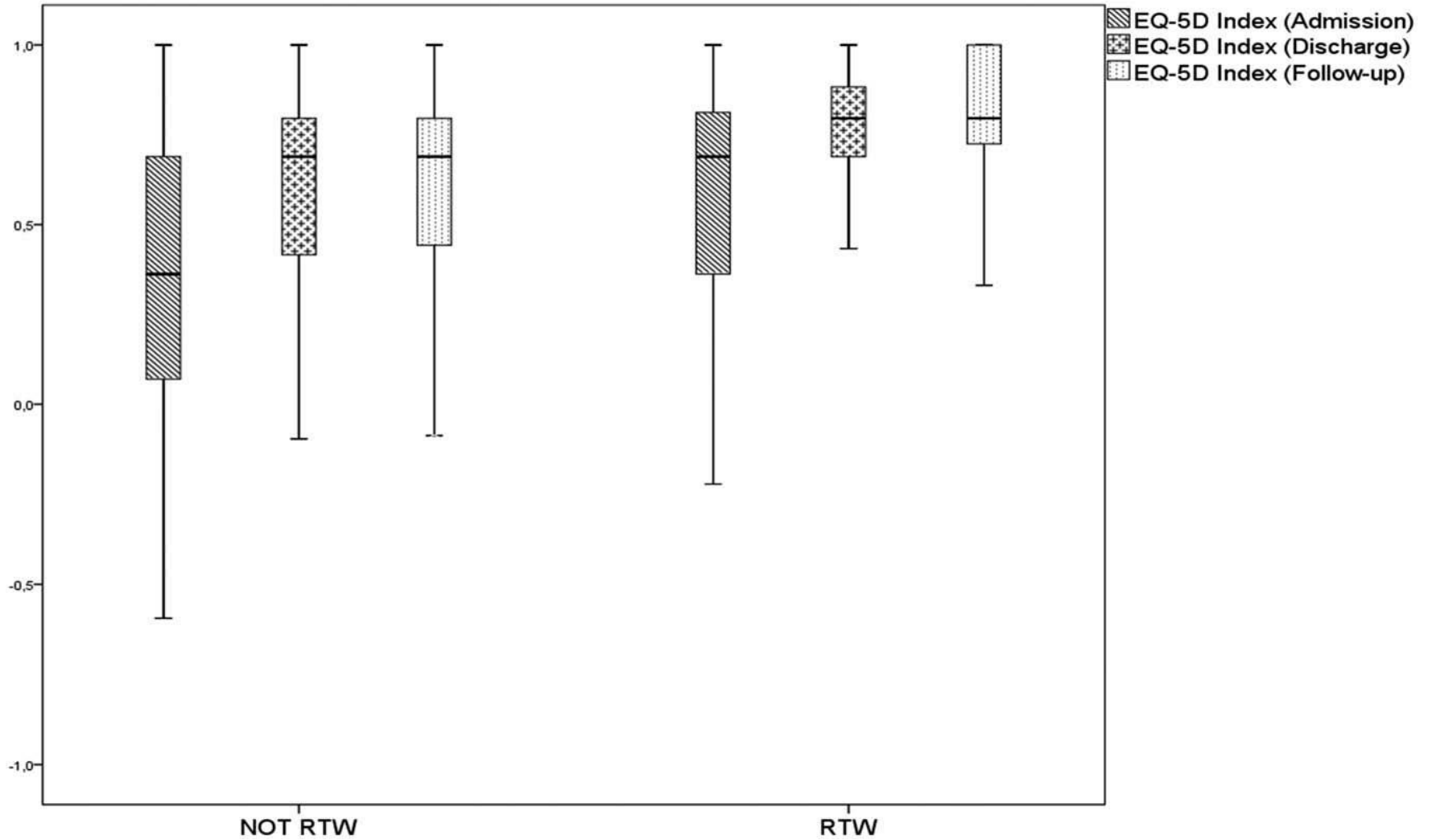


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EQ5D VAS

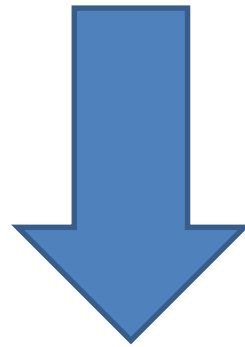


EQ5D Index



Discussion

RTW, University degree, physical ability and drivers license increases change in QoL among patients with ABI



Society should allocate resources to help people with ABI to RTW



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Take home message

- To put energy on factors that can support person with ABI to return to work.
- To focus on rehabilitation efforts that increase physical function and help the patient to get driver's license reinstated.



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Change in quality of life in relation to returning to work after acquired brain injury: a population-based register study

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ABSTRACT

Purpose: This study investigated changes in quality of life (QoL) in relation to return to work among patients with acquired brain injury (ABI).

Method: The sample consisted of 1487 patients with ABI (63% men) aged 18–66 years (mean age 52) from the WebRehab Sweden national quality register database. Only patients who worked at least 50% at admission to hospital and were on full sick leave at discharge from hospital were included. QoL was measured by the EuroQol EQ-5D questionnaire.

Results: Patients who returned to work perceived a larger improvement in QoL from discharge to follow-up one year after injury compared to patients who had not returned to work. This difference remained after adjustment for other factors associated with improved QoL, such as having a university education, increased Extended Glasgow Outcome Scale scores and getting one's driving licence reinstated.

Conclusion: Return to work is an important factor for change in QoL among patients with ABI, even after adjusting for other factors related to QoL. This is consistent with the hypothesis that having employment is meaningful, increases self-esteem and fosters participation in society. Thus, helping patients with ABI return to work has a positive influence on QoL.

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My thesis



<http://oru.diva-portal.org/smash/record.jsf?pid=diva2%3A1254009&dswid=-9621>

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