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UNPLANDED READMISSION FOLLOWING TRAUMATIC INJURIES IN THE SOUTH WEST REGION CAMEROON; ANALYSES OF THE PREVALENCE AND PATTERNS

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Introdction: Traumatic injury poses a huge healthcare challenge worldwide, this is even greater in developing countries which account for more than 90% of the 4.4 million deaths yearly from injury. Unplanned readmissions are a reliable and largely used indicator of the quality of care and patient outcomes. The aim of this study was to determine the prevalence and describe the patterns of unplanned readmissions following traumatic injuries in the South-West region of Cameroon.

Materrials and Methods: This was a 10-year retrospective descriptive review of hospital records from January 2013 to December 2022. Our study population included records of all patients 15 years and above, readmitted to the surgical wards of the Buea and Limbe Regional Hospital, after an initial hospitalization due to traumatic injury. Data collected was coded on Excel sheets and analyzed using the SPSS version 23, with univariate and multivariate analyses used with a p< 0.05 considered significant. The 30-day, 3-month ,6-month 1-year readmission prevalence rates were calculated and patterns described.

Results: A total of 8089 admission records were reviewed, of which 2617 injury admissions (32.35%). We retained 54 unplanned injury readmissions records (2.60% of all injury admissions). Prevalence rates of unplanned readmissions following traumatic injury were; 2.33%, 2.31%, 2.17%, 1.68% at 30-days, 3-months, 6-months and 1-year respectively. The main age group readmitted was 30-49 years (n=25, 46.30%). There were 40 males (74.07%) and 14 females (25.92%) giving a male-to-female ratio of 2.9:1. The injuries on initial hospitalization in the readmitted population were as follows; a total of 39 cases (72.22%)had injuries to the extremities, with fractures being the most common type of injury encountered in 37 cases (68.52%), of these 23 were closed (42.59%) and 14 open (25.93%). Fifty-one (94.44%) cases had an NISS>9. No comorbidities were present in 35 cases (64.81%). Orthopedic complications were the cause of 19 readmissions (35.19%) and soft tissue infections the cause in 13 cases (24.07%).



Conclusion: Unplanned readmissions following traumatic injuries is most prevalent within 30 days, but persists in the long-term. Fractures are the most common initial injuries in the readmitted population, with orthopedic complications and soft tissue infections being the most common causes of readmissions.

Key words: Unplanned readmissions, traumatic injury.