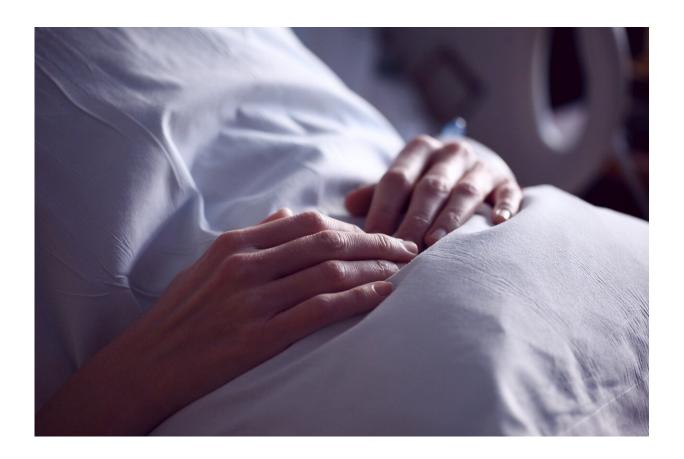


The majority of workers return to their jobs after being hospitalized for injuries

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Close to 60% of working adults who were hospitalized as a result of an injury had returned to their jobs after being discharged, according to a recent study in the *Journal of Trauma and Acute Care Surgery*.



However, more than half of the patients in the study's sample were in medical debt, and close to a quarter forwent additional care to save money. Compared to those who were not injured, patients were also more likely to experience food insecurity, physical disability, and difficulty affording and accessing <u>health care</u>.

The research team, which included several Michigan Medicine physicians, analyzed data from the 2008-2017 National Health Interview Surveys to investigate the long-term effects of injury.

Trauma patients had filled out these surveys an average of about seven weeks after they were discharged.

Whether patients have begun to work again after hospitalization can be an important indicator that they're healthy enough to resume their typical, pre-injury lifestyles. Yet, until the researchers conducted this study, no one had illustrated return-to-work rates on a national scale.

"This metric equips us to understand a patient's lived experience beyond us treating them in the hospital," says Pooja U. Neiman, M.D., M.P.A., a research fellow at the University of Michigan's Institute for Healthcare Policy and Innovation and a general surgery resident at the Brigham and Women's Hospital. "Today, the overwhelming majority of trauma patients survive to be discharged, which allows us to think bigger and say, 'Hey, this is a patient's life I'm trying to save. It's not just their beating heart."

Neiman noted that more research needs to be done to explain this paper's results.

For instance, the relatively high return-to-work rate could indicate that people are receiving enough quality follow-up care to recover quickly—or it could mean they're starting to work before they're



medically ready, out of financial concerns.

"We see this paper as an initial spotlight on the issue," Neiman says.
"But unanswered questions remain. More studies are needed to inform the end policy that best gets people back to work and financially whole after their injury."

Further investigation is needed to discern racial and ethnic risk factors as well. Initially, the study found that non-Hispanic Black patients returned to work after hospitalization at a far lower rate than their white counterparts. When the researchers adjusted their model for factors such as income, education, and health insurance, however, the racial link vanished—suggesting that issues of structural racism could be the source of the disparity. Neiman is involved in a follow-up study that will try to tease apart those <u>racial differences</u> by examining environmental influences, such as housing, on return-to-work rates.

More information: Pooja U. Neiman et al, Insult To Injury, *Journal of Trauma and Acute Care Surgery* (2021). DOI: 10.1097/TA.000000000003135

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