

Seniors' Active Lifestyles Lead to Increased Risk of Trauma

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(PhysOrg.com) -- Every day, adventure-loving enthusiasts across the country take to their bicycles, motorcycles or ATVs and end up in emergency rooms with traumatic injuries. While trauma is the No. 1 killer of those under age 44 in the United States, the second fastest-growing segment of trauma patients may be a surprise. They're senior citizens.

Accidents such as these often lead to traumatic brain and spinal cord injury, or death. In fact, John Morris, M.D., doesn't even refer to [traumatic injuries](#) as accidents, but rather as diseases, associated with high-risk behaviors.

“The rise in senior trauma really isn't all that surprising,” said Morris, chief of the Division of Trauma and Surgical Critical Care at Vanderbilt University Hospital.

“While falls are commonly the culprit, we're also seeing a rise in activity-based trauma among [Baby Boomers](#). We're living longer and remaining active longer. But we're still aging, resulting in slower reflexes and less agility,” he said.

According to the U.S. Department of Health and Human Services, adults over age 75 have the highest rates of traumatic brain injury-related hospitalizations and death.

Bob Ostrowe, another very active senior, had a passion for cross-country

biking. He and his wife, Denise Garland, had completed a grueling 836-mile, eight-day cycling vacation in Florida in 2006, just four months prior to a traumatic injury that changed Ostrowe's life forever.

At 64, he crashed his bike on Memorial Day weekend. Once paramedics arrived, he was already experiencing the signs of [traumatic brain injury](#) and, possibly, spinal cord injury. MRIs revealed severe frontal lobe injury.

After a long, uphill climb, Ostrowe has recovered, and is even cycling again, though, admittedly, at a slower pace.

A significant part of Ostrowe's recovery included months of physical therapy, which is often neglected by patients and families who, understandably, just want to get back to their lives as it was.

“No one can prepare you for the day your loved one is wheeled into a trauma unit,” Morris said. “Everything you know stops, and a new, frightening reality takes hold. It's human nature to want to leave the hospital as soon as possible, but recovery from a traumatic injury is slow, deliberate and life changing.

“Once we've solved the immediate crisis, the key to a successful recovery is rehabilitation and a strong support network. Without it, we know the results will be dramatically different,” he said.

Recognizing the need to offer both patient and family-centered care, Vanderbilt's Division of Trauma partnered with the American Trauma Society in implementing the Trauma Survivors Network (TSN).

TSN offers a variety of free services and resources, including the Peer Visitor program, which matches trauma survivors and their families with new patients, offering insights only a fellow survivor could offer.

Denise Garland immediately saw the value in such a support network and now serves as a Trauma Survivor peer mentor, sharing her and Ostrowe's story with those facing similar struggles.

“Mentoring the first patient was difficult,” said Garland. “You relive the emotional trauma, but it's all worth it if others can learn from our experience and see that something good can come from even the darkest days,” she said.

Provided by Vanderbilt Medical Center

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