

Post-trauma support can prevent repeat hospitalizations

December 31 2023, by Carole Tanzer Miller



When hospitals support trauma survivors' mental health during and after treatment, patients are less likely to return in crisis, researchers report.

There's no uniform guidance on how to offer mental health services to these patients, noted lead study author Laura Prater.

Fewer hospital readmissions are a good sign that people's mental health needs *are* being met at home.

"Being in the [emergency department](#) is traumatic in its own right, plus returning to the scene where you first received care following an injury or assault is not ideal," Prater said. "Managing trauma and the mental health fallout from that trauma is best done at home, where you're in a safe location."

Prater is now an assistant professor of health services management and policy at Ohio State University's College of Public Health. She completed the study while at the University of Washington.

Her team studied five years of data on patients who experienced traumatic incidents such as motor vehicle crashes, shootings and domestic violence.

The first-of-its-kind analysis included 171 patients who were seen at a University of Washington trauma center. They were randomly chosen to receive standard care or a comprehensive mental health intervention.

The intervention had three parts: having trauma survivors describe their personal concerns; coordinating [hospital care](#) and providing enhanced mental health treatment; and round-the-clock access to support after patients left the hospital.

Three to six months after the initial trauma, 16% of those in the intervention group were back in the hospital, compared to 27% of others. At 12 to 15 months, 17% of the [intervention group](#) had returned to the hospital, compared to 31% of those in [standard care](#).

"Being able to manage PTSD and other mental health concerns early on and receive regular follow-up support can prevent adverse long-term health problems and increase a survivor's ability to live a productive, meaningful life," Prater said in an Ohio State news release.

Prater said round-the-clock access to support via phone or [text message](#) seemed crucial in reducing readmissions.

"The immediate text message or phone call response to questions and concerns is potentially the most meaningful element of intervention, from the perspective of the survivors," she said, adding that response to MyChart or other messaging systems can be delayed.

"That is problematic if someone is feeling overwhelmed," Prater noted. "Having an immediate connection helped patients and their families to feel like they weren't in it alone."

As to the cost of adding in [mental health services](#), cutting [patients'](#) repeat use of [emergency care](#) will likely offset that expense, Prater's team said.

"The bottom line is we need to do a better job in helping people who are in vulnerable health situations navigate the fragmented health care system," Prater said.

More information: Best practices for treating trauma are detailed at the [American College of Surgeons](#).

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