

PTSD associated with more, longer hospitalizations

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Researchers from Boston University School of Medicine (BUSM) and Boston Medical Center (BMC) have found post-traumatic stress disorder (PTSD) is associated with more hospitalizations, longer hospitalizations and greater mental healthcare utilization in urban primary care patients. These findings appear in the current issue of *Medical Care*.

Prior studies suggest that trauma exposure and PTSD have considerable impact on health care use and costs. Most of this research, however, has focused on male veterans and female sexual assault victims but the impact on healthcare use in other populations is uncertain.

The researchers interviewed a sample of primary care patients to examine overall prevalence of traumatic exposure and select behavioral health outcomes in addition to PTSD, including major depression, substance dependence and chronic pain. The interview included demographic questions, the Composite International Diagnostic Interview (version 2.1 PTSD module), the Chronic Pain Definitional Questionnaire, the Patient Health Questionnaire (to measure depression) and the Composite International Diagnostic Interview-Short Form (for drug and alcohol dependence).

Among the participants, the researchers found that 80 percent had one or more trauma exposures. Compared to participants with no trauma exposure, subjects exposed to trauma were significantly more likely to be males, unmarried, have substance dependence and depression. They also had more mental health visits than those with no trauma exposure.

Among the participants, 22 percent had current PTSD. Compared to participants without PTSD, those with PTSD were significantly more likely to be female, to have an annual income of less than or equal to \$20,000, have substance dependence and depression. PTSD participants also had more hospitalizations and mental health visits.

According to the researchers, among urban primary care patients PTSD is associated with greater health care use: both mental health visits and hospitalizations. “Unexpectedly, trauma exposure by itself was not associated with increased healthcare utilization apart from mental health visits, a finding which was attenuated after adjusting for PTSD,” said lead author Anand Kartha, MD, an assistant professor of medicine at BUSM. “This may be due to the fact that the non-traumatized to whom we are comparing the traumatized patients, have complex social milieu leading to high utilization,” added Kartha.

“PTSD has a cost beyond the specific mental health symptoms,” said senior author Jane Liebschutz, MD, an associate professor of medicine and social and behavioral sciences at BUSM and a primary care physician at BMC. “PTSD may be on the causal pathway between trauma experiences and negative health consequences. These findings are relevant in light of the PTSD prevalence not only in our returning veterans, but in areas of urban poor,” she added.

Source: Boston University

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