A close up of MSKTC logo



# Quick Review of Model System Research

### Hospital-acquired complications alter quality of life in adult burn survivors: Report from a burn model system

### What is the study about?

Although there are many risk factors that influence long-term outcomes after burn injury, many of these risk factors have yet to be identified. This study examines whether hospital-acquired complications (HACs) are a risk factor that affect patient-reported quality of life in adult burn survivors.

### What did the study find?

The results of this study show that complications from HACs negatively impact long-term quality of life in adult burn survivors, especially in terms of physical function. For example, the study found that patients who suffered urinary tract infection, [venous](https://www.merriam-webster.com/dictionary/venous) [thromboembolism](https://www.merriam-webster.com/dictionary/thromboembolism), [renal](https://www.merriam-webster.com/dictionary/renal) failure, and [pulmonary](https://www.merriam-webster.com/dictionary/pulmonary) complications during hospitalization reported a decrease in quality of life.

### Who participated in the study?

Study participants included 496 adults with major burn injuries who had been admitted to the University of Washington Medicine Regional Burn Center.

### How was the study conducted?

This study collected data through in-person and telephone interviews with study participants between 1993 and 2014. All participants completed a Health Survey at several points through the course of the study. Several statistical analyses were used to evaluate survey responses.

### [How can people use the results?](file:///C:\\Users\\ccai\\AppData\\Local\\Microsoft\\Windows\\Temporary%20Internet%20Files\\Content.Outlook\\4WHR71C4\\Bogner_CER-1403-13476_DFRR_Professional%20and%20Public%20Abstract_SME%20Review_102918%20ccai.docx" \l "Note" \o "Describe who could use the results and how. Could be patient, doctor, administration, centers. Should make sense given findings and study design. Do not overreach.)

Practitioners and burn survivors can use these results to become better informed regarding the influence of HACs on patient reported long-term outcomes.

### [Reference](file:///C:\\Users\\ccai\\AppData\\Local\\Microsoft\\Windows\\Temporary%20Internet%20Files\\Content.Outlook\\4WHR71C4\\Bogner_CER-1403-13476_DFRR_Professional%20and%20Public%20Abstract_SME%20Review_102918%20ccai.docx" \l "Note" \o "Describe who could use the results and how. Could be patient, doctor, administration, centers. Should make sense given findings and study design. Do not overreach.)

Deeter, L., Seaton, M., Carrougher, G. J., Mcmullen, K., Mandell, S. P., Amtmann, D., & Gibran, N. S. (2019). Hospital-acquired complications alter quality of life in adult burn survivors: Report from a burn model system. Burns, 45(1), 42-47. doi:10.1016/j.burns.2018.10.010. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/30477817>

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