How large is the proportion of patients that show a significant improvement in health related quality of life after an extended period of critical illness?

L. Orwelius1,2,4, S. Walther3,4, C. Mårdh4, C. Agvald-Öhman4, C-J Wickerts4, Folke Sjöberg1,2,4

1 Depts. of Intensive Care, 2 Clinical and Experimental Medicine, 3 Division of Cardiovascular Medicine, all at the Faculty of Health Sciences, Linköping University, Linköping, Sweden
4 The Swedish Intensive Care Registry, Sweden
Introduction

Swedish Intensive Care Registry

Patient reported outcome measures (PROMs)

Health related quality of life (HRQoL)

SF-36 at 2, 6 and 12 mths after discharge

- To evaluate whether and to what extent patients with long ICU-stay (>96 hrs) were affected 2 mths after discharge from ICU.

- If there were any changes in HRQoL over time (<12 mths)
All ICU-patients with an age ≥16 years and an ICU length of stay ≥ 96 hours were examined 2, 6 and 12 months after discharge from ICU.

Examination took place at follow-up clinics by staff from the ICU.

Impact of background- and ICU related factors on HRQoL were analysed.
Results

- 847 patients over time (2, 6 and 12 mths)
- Age mean 62 years
- Male 61.5%
- Duration of stay in ICU median 169 hrs (Q 118-287)
- Time in ventilator median 130 hrs (Q 66-245)
- SAPS3 score 59.8 (SD 13.6)
- SAPS3 defined comorbidity n=118 (16.5%)
Changes in HRQoL over time

2 – 6 months:
27% were improved
5% got worse
1% unchanged
67% mix of changes: PF most improved and GH most impaired

6 – 12 months:
22% were improved
10% got worse
68% mix of changes: VT most improved and MH most impaired

CONCLUSIONS
Conclusions

- Recovery in HRQoL was most rapid early post ICU (2-6 months)
- 25% perceived improvement in all 8 SF-36 dimensions between 2 and 12 months after intensive care
- 66% perceived a mix of improvements and impairments between 2 and 12 months after intensive care
- The overall most improved dimension was RP
- There was minimal improvement in GH between 2 and 12 mths