

13. **MILD TRAUMATIC BRAIN INJURY: WHAT WE CAN LEARN FROM A QUALITATIVE STUDY OF PATIENT PERCEPTIONS FOLLOWING EMERGENCY DEPARTMENT DISCHARGE.**

Kate Ziqiu Wang<sup>1</sup>, Marcia Ward<sup>2</sup>, John Macfarlane<sup>3</sup>.

<sup>1</sup> MB BCh BAO. University College Cork, Cork, Ireland. University of British Columbia/Coastal Family Medicine Residency, Vancouver, Canada.

<sup>2</sup> D.Clin.Psych. University College Cork, Cork, Ireland. University College Cork/Cork University Hospital, Cork, Ireland.

<sup>3</sup> M.B.B.S., FRCP. University College Cork, Cork, Ireland. University College Cork/Mercy University Hospital, Cork, Ireland. University College Cork/Cork University Hospital, Cork, Ireland.

 <https://www.youtube.com/watch?v=0JIMP5Fyl7s&t=26315s>

**INTRODUCTION:** Mild traumatic brain injuries (mTBI) are common; however, patients often fall into a grey zone of care following acute treatment. Research increasingly shows that despite the initial clearance of traumatic symptoms, patients often suffer from lack of standardised care and return with increased symptoms. Both physical and psychological symptoms are prevalent, with patients reporting symptoms years afterwards. There is little support in Ireland for patients until chronic diagnosis (>2.5 months after the incident) leaving a large gap in care after Emergency Department (ED) discharge. This study investigated the experiences of patients with mTBI to identify barriers and suggest clinically relevant areas for improvement in the current system of care. **METHODS:** 16 patients with a clinical diagnosis of mTBI were recruited from the Cork University Hospital ED for participation in this study. Semi-structured phone interviews were conducted at approximately 2.5-3 months post-discharge. Reflexive thematic analysis with an inductive and realist approach was used to code and inductively analyse the data. The most frequently occurring themes and their relationship to subthemes are reported. **RESULTS:** A total of 16 mTBI adult patients were interviewed (mean age: 50.5 (18-85)). Major themes identified in the experience of mTBI patients were: lack of clarity in diagnosis and treatment, poor access to information, and ongoing symptoms. 87.5% of participants reported being uncertain about their diagnosis of mTBI and 93.8% of participants did not seek further information regarding their head injury. 43.8% of the participants reported prolonged recovery with two participants (12.5%) reporting ongoing symptoms. Headache, photophobia, and difficulty with thinking and memory were the predominant symptoms reported. **CONCLUSION:** Several overarching themes were identified in the qualitative self-reported experiences of mTBI patients following ED discharge. Participants reported persistent symptoms, lack of clarity, and a lack of access to information regarding their mTBI diagnosis and treatment. Suggested recommendations for future practice include adding psychoeducational resources and increasing awareness and training among staff to provide timely patient education.

**Table.** Subthemes in the Experience of Mild Traumatic Brain Injury Identified in ≥75% of Participants.

Major theme	Subtheme	Sample data extract
Poor access to information	Lack of information seeking (93.8%)	Interviewer: That's great. And did you ever do any research yourself on the internet or any books at all? Participant 7: No, I made that case, right. If I looked up, Mr. Google, I would have everything that was ever threatened. Participant 7, 66, Male

Lack of available information (75%)

Interviewer: Before you left, did they give you any papers on returning to school, returning to driving, returning to work? That kind of stuff?

Participant 12: No, they didn't really. They just kind of told me basically what to do with my head. I couldn't get it wet for like hours and if it were to keep bleeding to go back.

Interviewer: So, for the wound?

Participant 12: Yeah, for the wound. They didn't actually give me anything about a head injury.

Participant 12, 22, Female

Participant 4: I got a sheet, the first time I went in. I did get that sheet about head injuries.

Interviewer: Ok, so they gave you a sheet. Did they walk through it with you at all?

Participant 4: No and I really think they should... I think there should be more of a song and dance made about concussions because if I had realized I was concussed earlier, I probably would've made some other decisions. I would have possibly had a better opportunity of coming out unscathed.

Participant 4, 39, Female

Lack of clarity in diagnosis and treatment

Unclear diagnosis (87.5%)

Participant 1: I didn't receive any diagnosis, no. It was an injury; I had a good bang, and I didn't. But I supposed there was no need. I came around and I'm alright.

Participant 1, 75, Male

Interviewer: when you were at the emergency, did anybody tell you about the head injury that you had?

Participant 10: No, no, nothing.

Interviewer: Alright, so what was your understanding leaving CUH of I guess what happened and what your treatment was going to be?

Participant 10: Well, my understanding was just go home and get on with it.

Participant 10, 66, Female

**Key words:** Mild Traumatic Brain Injury; Post-Concussion Syndrome; Perception; Qualitative Research; Health Knowledge; Attitudes; Practice.