



**Karolinska
Institutet**

Institutionen för molekylär medicin och kirurgi

**MEMORIES OF PAIN, ADAPTATION TO LIFE AND
EARLY IDENTIFICATION OF STRESSORS IN PATIENTS
WITH BURNS**

AKADEMISK AVHANDLING

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ABSTRACT

Background: Burn injury is an unforeseen event causing physical and psychological trauma for the person afflicted. Patients treated for burns commonly experience high levels of pain and anxiety related to burn treatment during burn care. During the first year after burn injury patients may still be coping with intrusive memories and struggle with daily problems related to physical limitations and body image dissatisfaction. Despite the trauma, most burn patients adapt well to life after injury but some are unable to readjust, resulting in persisting psychological symptoms.

The overall aim of this thesis was to investigate the patient's experience during burn care and at follow-up with focus on pain, body image, posttraumatic stress and coping and explore adaptation to life after burn injury.

Methods: Studies I and II were qualitative and interviews were conducted with 12 adult burn patients, 6-12 months post-burn, and explored burn patients' experiences of pain, coping and adjustment. Study III, focused on to culturally adapt and validate the Satisfaction With Appearance Scale (SWAP) into Swedish to be to be used in the context of burn care. Pre-testing of the questionnaire was conducted with 13 former burn patients and psychometric properties were tested in 90 respondents. In study IV, 52 burn patients were followed at the three months after discharge and 32 patients completed the six month follow up. A standardised clinical protocol was used for systematic assessment of posttraumatic stress disorder (PTSD), body image dissatisfaction and coping strategies. The follow-up included an intervention with a burn nurse to complement the existing program.

Results: Patients provide a multifaceted description of burn pain and many aspects of daily burn care are painful. In general, coping during hospitalization was characterised by efforts to "endure" the pain experience itself. Patients depict post-injury life as a struggle to live with the sequelae of a burn injury. This struggle involves various ways of dealing with a fragile body, with limitations to activities of daily living and emotional processing of the trauma.

The Swedish version of the Satisfaction with Appearance Scale (SWAP-Swe) proved to be a reliable and valid instrument for assessing body image dissatisfaction. Higher body image dissatisfaction was found for female gender, for participants with moderate burns and longer hospital stay and participants who undergo surgery during burn care. Approximately half of the patients had a risk of developing PTSD three months after discharge from hospital, and body image dissatisfaction was found to potentially predict risk for PTSD during follow-up.

Conclusions: There is a need for increased focus on and the development of pain treatment for burn injury, especially with burn wound procedures. Psychosocial support for patients should be implemented in the future to support coping and to increase the patients' ability to adapt to burn injury. Body image dissatisfaction is a stressor after burn injury, and particular attention should be directed towards the female patients' and patients with more extensive burns. It is important to include patients with less extensive burns in early follow-up care since this group is at risk of developing PTSD.

Keywords: Burn injury, Pain, Patient perspectives, Body Image, Disfigurement, Cross-cultural adaptation, Questionnaire, PTSD, Adaptation, Coping