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Patients with disabilities of the arm, shoulder or hand - and problems in occupational performance

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Patients with disabilities of the arm, shoulder or hand – and problems in occupational performance

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Objectives

- To identify the patients problems in occupational performance before and after OT intervention
- To examine relationship between change in occupational performance ability and demographic factors: age, gender, civil status, and work
- To enhance the activity based perspective in the orthopaedic OT service at Copenhagen University Hospital, Gentofte, Denmark in cooperation with dep. for Occupation Therapy at Metropolitan University College, Copenhagen, Denmark

Conclusion

- Patients with lesions in the wrist or forearm improved their occupational performance ability significantly, compared to patients with finger fractures (p < 0.02) and arthroplastics (p < 0.05)
- Patients living alone may improve the occupational performance ability more than people living together with someone (p < 0.07)
- No significant association between QuickDASH-diff. and gender (r = 0.029), educational level (p < 0.8) and working status (p < 0.5)
- Research is needed in how people with orthopaedic arm, shoulder or hand lesions manage daily life, when working and when living alone
- Also, further research is needed to improve occupational therapy intervention to people with orthopaedic arm, shoulder or hand lesions

Design and method

- A time series “before and after” study
- Participants were asked to fill in a data sheet questionnaire regarding demographics before OT intervention
- Participants were asked to fill in a Quick DASH Questionnaire before and after OT intervention

Material

- At Copenhagen University Hospital, Gentofte 82 outpatients in occupational therapy because of orthopaedic hand-, wrist- or forearm-lesion were included from August 2011 until April 2012.
- Thirty six were excluded due to lack of data or non completed study procedure

Participant characteristics – type of lesion

<table>
<thead>
<tr>
<th>Number</th>
<th>Total (F/M)</th>
<th>Finger fracture (n=10)</th>
<th>Tendon rupture (n=5)</th>
<th>Wrist and forearm (n=20)</th>
<th>Arthroplastics (n=5)</th>
<th>Miscel- laneous (n=6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Mean (F/M)</td>
<td>53.7 (58.7/45.9)</td>
<td>43.3 (44.3/42.8)</td>
<td>47.6 (47/47.6)</td>
<td>59.6 (62/59.6)</td>
<td>62.6 (64/62.6)</td>
</tr>
<tr>
<td>DASH diff (mean-visited)</td>
<td>Total (F/M)</td>
<td>20.4 (22.5/16.7)</td>
<td>13.3 (16/11.9)</td>
<td>28.2 (28/28.2)</td>
<td>30.8 (28.3/30.8)</td>
<td>18.8 (19.2/18.8)</td>
</tr>
</tbody>
</table>

The Quick DASH questionnaire

- The Quick Disabilities of the Arm, Shoulder and Hand questionnaire is a self reporting questionnaire, validated for use in patients with impaired arm, shoulder or hand
- Eleven questions regarding occupational performance are to be evaluated using a 5-point nominal scale
- The questionnaire addresses
  ✓ Opening a jar
  ✓ Heavy Household
  ✓ Carrying a shopping bag
  ✓ Washing your back
  ✓ Cutting your food
  ✓ Recreational activities
  ✓ Social activities
  ✓ Work/regular activities
  ✓ Pain
  ✓ Tingling
  ✓ Sleep

- The assigned values for all questions are summed and transformed to a score out of 100
- The “DASH diff” is the difference between before- and after-score

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