

Increased long-term death risk for adolescents hospitalized for adversity-related injury

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Adolescents discharged from hospitals in England after an admission for violent, drug- or alcohol-related, or self-inflicted injuries have increased risks of subsequent death and emergency re-admission up to a decade later, according to a study published this week in *PLOS Medicine*. The study, conducted by Annie Herbert at University College London, UK, and colleagues, showed that in England, risks of death after all types of adversity-related injury were higher than after accident-related injury (61% (95% CI 43%-82%) higher in girls and 113% (95% CI 98%-129%) higher in boys).

Adolescents who present with an adversity-related injury often re-present later with other adversity-related injuries. However, national guidance in England stipulates psychosocial assessment only for presentations of self-inflicted injury. To determine which adolescents in the broader group are at elevated risk of further harm, Herbert and [colleagues](#) used National Health Service hospital admissions data from 1997 into 2012 for 10-19 year olds with emergency admissions for adversity-related or accident-related injury (333,009 and 649,818 adolescents, respectively). Among adolescents discharged after adversity-related injury, one in 137 girls and one in 64 boys died within ten years, and 54.2% of girls and 40.5% of boys had a subsequent emergency re-admission. These rates were roughly 1.5-2 times higher than after accident-related injury. Risks of death were highest in 18-19 year olds (one in 52 boys and one in 90 girls), and those with either chronic conditions (typically mental/behavioural or respiratory disorders for [adolescents](#) in this study) or who lived in deprived areas.

Misclassification of some adversity-related injuries as accident-related injuries, and residual confounding by unknown characteristics shared

within the two groups, may affect the accuracy of these findings. Nevertheless, these findings identify a broader range of risk factors for subsequent harm. The authors state, "[t]hese findings justify extending national policy for psychosocial assessment after self-inflicted injury to all types of adversity-related injury."

More information: Annie Herbert et al. 10-y Risks of Death and Emergency Re-admission in Adolescents Hospitalised with Violent, Drug- or Alcohol-Related, or Self-Inflicted Injury: A Population-Based Cohort Study, *PLOS Medicine* (2015). [DOI: 10.1371/journal.pmed.1001931](https://doi.org/10.1371/journal.pmed.1001931)

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