

## **Patients who broke bones in traumatic accidents frequently suffer from stress disorder, UT Southwestern researchers discover**

DALLAS – June 3, 2004 – People who have had a traumatic bone break also frequently suffer from Post-traumatic Stress Disorder, researchers at UT Southwestern Medical Center at Dallas have found.

Research that appears in the June 5 issue of *The Journal of Bone and Joint Surgery* is available online and explains why some people take longer to recover after an injury even though their bone has physically healed.

“The thing that drove us to do this study was the frustration we felt as physicians,” said Dr. Adam Starr, assistant professor of orthopaedic surgery and the study’s lead author.

“We have patients who go through these traumatic events, and medically they have healed. But they come back to the clinic and say, ‘I just don’t feel right,’ or ‘I’m not ready to go back to work,’” he said. “You dig a little deeper, and you discover that they are having nightmares or flashbacks, or their wife will tell you ‘He cries every night,’ or ‘He has angry outbursts all the time.’”

Post-traumatic Stress Disorder (PTSD) is a mental illness caused by witnessing or experiencing an event involving serious injury, or threatened or actual death. Those with the disorder experience intense fear, helplessness or horror.

The more severe the orthopaedic injury, the more likely a patient is to suffer from the disorder, Dr. Starr concluded in the study.

Researchers used a questionnaire based on one designed to detect combat-related PTSD. Some 580 civilian orthopaedic trauma patients were queried. Of those patients, almost 51 percent (295) were found to have the disorder. Study participants' average time since the injury was one year. Falls and motor vehicle collisions were responsible for the most injuries. Injuries were also caused by motor vehicle-pedestrian collision, motorcycle collision, a crush injury, bicycles, horseback riding and gunshot wounds.

The next step, researchers say, is to determine how to best identify and effectively treat patients with the disorder.

“If it turns out you can treat the PTSD too, it has enormous implications for treating orthopaedic trauma,” Dr. Starr said.

Other UT Southwestern researchers involved in the study were Dr. William Frawley, assistant professor of academic computing services; and Dr. Charles Reinert, associate professor of orthopaedic surgery. Researchers at Parkland Health & Hospital System and Denver Health Medical Center also contributed to the study.

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