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“The association between burn location and psychological distress among outpatients with prior burn injury”

Although there has been extensive research conducted on the psychological effects of burn injuries, little attention has been paid to the relationship between the specific location of burn injuries and psychological distress. Given that burn survivors often experience changes in appearance, physical discomfort, and interruption of daily activities, it is probable that location would influence the level of distress among burn patients.

The present study uses a cross-sectional analysis that is being conducted on a cohort of burn outpatients presenting to the outpatient Burn Center to investigate the association between the location of a burn and psychological distress. Participants were invited to respond to the survey if they were treated at the outpatient burn clinic for injuries ranging from friction burns, thermal burns, chemical burns and other burn related injuries. Inclusion criteria were English-speaking adults 18 years and older with prior burn injuries of total burn surface area (TBSA) \leq 5%. Exclusion criteria were active psychosis, signs of imminent suicidality or homicidality, or being a member of a vulnerable population. Psychological distress is measured using the following scales: BSHS-Brief, Rosenberg Self-Esteem Scale, PHQ-9, PC PTSD-5, and BAI - PC. Descriptive statistics will be conducted on the data and the primary hypotheses will be evaluated using a series of multiple linear regressions to assess whether the location of the burn predicts psychological distress. Comparison analysis will include critical areas (hands, feet, face, genitals) versus non-critical areas (all other anatomical locations). Additionally, each critical area will be statistically examined against the entirety of the collected data; for example, data from burns on hands will be compared to burns occurring on all other anatomical locations. It is hypothesized that there will be an association between burn location and psychological distress among adult outpatients.

At present, 60 participants have been enrolled in our study. We have a projected goal of 75-80 participants, in order to complete the study and obtain sufficient power to detect results. Early intervention has been established as a key element for reducing psychological distress. The results of our study will inform interventions that will ultimately bolster the emotional well-being of future burn survivors.