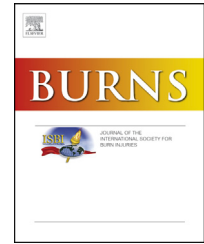


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Review

Psychosocial adjustment following burns: An integrative literature review

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ABSTRACT

Introduction: Burn care innovations have vastly reduced mortality rates and improved prognoses, fostering the need for multi-disciplinary input in holistic recovery. Consequently psychological and social considerations post-burn are included in National Burn Care Standards and have featured increasingly in burns literature.

Aim: To identify the key findings of the rapidly expanding literature base for psychosocial adjustment post-burn, highlighting the most important knowledge and future directions for both practice and research.

Method: MEDLINE, CINAHL, EMBASE, PsycINFO, BNI, HMIC databases were searched from January 2003 to September 2013 using search terms regarding psychosocial adjustment post-burn. After exclusions 24 papers underwent critical appraisal.

Results: Studies were categorised by the element of adjustment that they examined; psychopathology, quality of life, return to work, interpersonal, post-traumatic growth. Strengths, weaknesses, and significant findings within each category were presented.

Discussion: Although psychopathology and quality of life were well-researched compared to other categories, all would benefit from methodological improvements such as sample size or dropout rates. Coping strategies, premorbid psychopathology, and personality consistently featured as predictors of adjustment, although research should now move from identifying predictors, to clarifying the concept and parameters of psychosocial adjustment while developing and evaluating interventions to improve outcomes.

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1. Introduction

Burns have the potential to cause severe and enduring physical and psychological damage to burn survivors. Preceding decades have seen significant improvements in the medical care of burns, considerably reducing mortality rates and improving prognosis for return to physical functioning [1,2]. These changes have been catalysed by increased research and understandings of burns, technological advances in medicine, surgery and critical care, and the introduction of specialised services to treat burn survivors [2-4]. Consequently, improved prognosis and novel approaches to burn care have paved the way for the introduction of multidisciplinary teams to aid in holistic recovery and rehabilitation, taking into consideration physical, psychological, and social matters [1,3,5]. Teams often include clinical psychologists, social workers, and counsellors, as well as surgeons, doctors, nurses, anaesthetists, physiotherapists, occupational therapists, and dieticians [2,5].

Following the consideration of psychosocial adjustment and rehabilitation as a significant part of a burn recovery, and the inclusion of the relevant disciplines, there has been an increased focus in the literature on the role, understanding, and importance of psychosocial adjustment post-burn. Although a relatively youthful area of research in comparison to physical rehabilitation, significant advancements have been made to aid understandings of psychosocial considerations in burns [1,6].

Initially, investigations into psychosocial adjustment post-burn focused on prevalence of maladjustment in survivors, commonly being measured by psychopathology or quality of life [6,7]. Subsequently, the literature focused on identifying and understanding predictors or risk factors associated with psychosocial adjustment, before beginning to examine methods by which these may be manipulated to improve psychosocial outcomes [8,9]. Simultaneously the relatively undefined term of psychosocial adjustment began to receive clarification and focus, as research and practice moved more towards social, occupational, relational, and growth factors for gauging adjustment rather than simply focusing more generally on psychopathology and quality of life [6,10].

Research has identified numerous predictors and risk factors, not without contradiction in the literature, that may influence psychosocial adjustment to varying degrees, such as personality, coping strategies, perceived social support, premorbid psychopathology, demographic and social factors [6,11-15].

However, there are gaps in the literature concerning the areas of prevention, intervention, and improving outcomes for psychosocial adjustment post-burn, and a fractious and varied approach to the measurement of psychosocial adjustment. In light on contradictions in the literature, a focus on predictors and risk factors, and a lack of intervention and outcome-focused research, an integrative literature review methodology was chosen to facilitate a thorough exploration of the burns literature specifically relating to psychosocial adjustment, while generating new and updated perspectives on this subject [16].

This literature review aims to identify and report the key findings of the rapidly expanding research base for psychosocial adjustment post-burns, endeavouring to clarify the most important knowledge available for healthcare professionals, highlight the most pertinent future research directions to strengthen the literature base, and allow the emergence of new standpoints in this field.

2. Method

An integrative literature review was completed to address the aims of the study, seeking to review, critique, and synthesise the findings of existing research into post-burn psychosocial adjustment to present an accurate summary and foster new perspectives [16]. This methodology allowed for the inclusion of studies with diverse methodologies of varying design, while facilitating critical examination of the strength of existing evidence, and identification of gaps in current literature and future research needs [17,18]. The ability of such reviews to support evidence-based practice has been highlighted previously, demonstrating the potential value to the dynamic and emerging field of psychosocial adjustment post-burn [17].

2.1. Databases and keywords

The databases MEDLINE, EMBASE, PsycINFO, BNI, HMIC, and CINAHL were searched in September 2013, with the time parameters of January 2003 to September 2013. The search terms and their combinations, presented in Table 1, yielded 101 individual articles.

2.2. Exclusion criteria

Opinion articles, supplement articles, papers unavailable in full or in the English language, studies involving participants

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