Quality of Life

Long-term Quality of Life Outcomes in Injured Tri-service U.S. Military Personnel: The Wounded Warrior Recovery Project

The long-term effects of blast-related injuries and diagnoses are not well understood. To better understand the consequences of these combat injuries on Service members’ long-term health and readiness, the Naval Health Research Center (San Diego, California), is longitudinally assessing clinical, rehabilitative, and patient-reported outcomes, including quality of life (QOL) and mental health symptoms, in injured U.S. Service members. Enrollment for this project, named the Wounded Warrior Recovery Project (WWRP), is ongoing and each of the more than 52,000 Service members injured in Iraq and Afghanistan beginning in October 2001 will be invited to participate in the study.

WWRP is a 15-year, longitudinal, prospective, population-based survey study of injured Service members, with participants completing follow-up assessments every six months. This study is being conducted predominantly online, with supplemental telephone and paper surveys for those Service members who cannot respond online. The project’s public facing website can be viewed here: www.wwrecoveryproject.org (Figure 1).

WWRP includes longitudinal assessments of patient-reported posttraumatic stress disorder (PTSD) and depression symptoms and health-related QOL (Woodruff, McCabe, et al. 2017). Additionally, several cross-sectional assessments have been deployed, allowing the research team to examine social support, chronic pain, and functioning ratings for orthotic and prosthetic users (Watrous, McCabe, Sack, and Galarneau 2017). Future follow-up surveys will include prosthetic and orthotic use satisfaction, additional QOL measures, and health behaviors. Measures are chosen with the aim of examining the complex relationship between physical and mental health and its impact on QOL. This research allows for further understanding of the long-term outcomes and needs for injured Service members, many of whom were injured due to blasts.

To date, over 5,200 injured Service members have provided informed consent and enrolled in the study and over 18,000 surveys have been completed. Approximately 79 percent of respondents were injured in a blast event (Woodruff, McCabe, et al. 2017). In general, PTSD and depression were prevalent and associated with lower QOL. Participants with amputations and those with injuries to the head and spine may be at high risk for poorer outcomes (Watrous, McCabe, Sack, Woodruff, et al. 2017, Woodruff, Galarneau, McCabe, et al. 2017, Woodruff, Galarneau, Sack, et al. 2017). Results highlight the need for optimizing screening and intervention practices to minimize the impact of the psychological consequences of combat injuries.

By assessing long-term QOL outcomes, clinical treatments, rehabilitative programs, and prosthetics/orthotics can be optimized to improve long-term QOL for injured Service members.
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REFERENCES:


