## STRONG CHILDREN'S RESEARCH CENTER

Summer 2019 Research Scholar

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## **ABSTRACT**

<u>Title:</u> Patient-reported outcomes and lower extremity injuries of young athletes in a sports medicine clinic: a retrospective cohort study

**<u>Background:</u>** There are large epidemiological studies on injuries in endurance athletes, but there is little information available in the literature on how patient-reported outcomes may correlate with injury recovery, particularly in the adolescent population. Patients' mood, physical mobility and pain

<u>Objective:</u> To examine Patient-Reported Outcomes Measurement Information System (PROMIS) scores in an adolescent athlete population visiting sports medicine clinic with lower extremity injuries.

Methods: The cohort was composed of patients that completed an in-clinic injury survey between December 2016 and June 2019 in a single sports medicine practice. A data abstraction form was constructed and utilized by the study team for data collection from the survey and from the medical record. Inclusion criteria for the study were age <21 years old and having a lower extremity injury. Diagnosis, injury location, treatment plan and PROMIS scores were obtained from medical records. PROMIS Scores, assessing Depression, Physical Function and Pain Interference were gathered at each visit. (Higher Depression scores indicate lower mood, higher Physical Function scores indicate greater physical function, higher Pain Interference scores indicate greater interference in daily life caused by pain). PROMIS scores available for each patient in records for the first and last consult were selected for the purposes of the study. Meaningful change in PROMIS score was defined as 2.5 for Depression, 2 for Physical Function and 2.5 for Pain Interference. For PROMIS Score statistical analysis, only patients with first and last score were included. Paired t-tests were utilized to examined PROMIS scores by gender and linear regression were utilized to examine PROMIS scores PROMIS scores. Co-factors: Age, Gender

**Results:** This cohort included 68 pediatric patients, with a mean age of  $16 \pm 2.2$  years, 73% were female. The vast majority (93%) of the diagnoses were overuse injuries: stress fracture (26%), medial tibial stress syndrome (shin splints) (13%), lower extremity tendinitis (18%) and patellofemoral pain syndrome (18%). The tibia was the most common stress fracture location (58%), followed by the femur (16%). More than 70% reported participation in organized running (e.g. track, cross-country or both).

Mean initial PROMIS scores were Depression  $41.5 \pm 7.5$ , Physical Function  $44.7 \pm 9.6$  and Pain Interference  $51.4 \pm 7.8$ . Follow-up visit mean scores were  $39 \pm 8.7$ ,  $49 \pm 9.8$  and  $44.9 \pm 8.9$  respectively for Depression, Physical Function and Pain Interference. Follow-up Depression PROMIS scores were lower for the overall sample (p=0.03)

scores showed increased scores with age (p<0.01), as did Pain Interference scores, showing initial pain was greater in older patients. (p=0.01).

## **Conclusions:**

There were meaningful differences in Physical Function and Pain Interference PROMIS scores in the overall sample but only in males were meaningful changes observed for Depression PROMIS scores. While this study was limited by a small sample size, PROMIS scores may be a factor in predicting recovery from lower extremity injury in adolescent populations. This work formulated a baseline of work from which a future prospective study to examine predictive risk factors for injury recovery in this population will be designed. Examples of other co-factors that could be explored are: location of injury, stress fracture status, training intensity (miles ran per week) and return to sport.