

Date: Sunday, December 8, 2019

Time: 10:30 – 10:45 am

<b>Abstract Title:</b>	<b>Survey Of National Practice Of Prevention, Diagnostic Tool(s), and Treatment Of Heterotopic Ossification For Burn Patients In The United States</b>
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<b>Objective:</b>	<ol style="list-style-type: none"><li>1) Identify the implications of HO on a burn patient.</li><li>2) Determine what are the practiced prevention and treatment interventions for HO in US burn centers.</li><li>3) Determine what are the utilized tool(s) for diagnosis of HO in US burn centers.</li></ol>
<b>Abstract:</b>	<p><b>Introduction:</b> Heterotopic ossification (HO) is the formation of lamellar bone within connective and other tissue where bone should not form. HO is a complication of burn injuries and has severe negative effects on pain, joint range of motion, quality of life, and daily function. These negative effects have been well researched and documented, and call for the need to better understand HO. Unfortunately, there continues to be a lack of research on how to prevent, treatment, and/or diagnose/screen for HO. Though the research is sparse, the occurrence of HO still has to be addressed at burn centers when patients develop this complication. The aim of the survey is to understand what is being practiced within the United States in terms of HO prevention, treatment, and diagnostic tool(s) in order to provide progress towards standardized care and direction for future research of HO following an acute burn injury.</p> <p><b>Methods:</b> The primary investigator contacted all American Burn Association (ABA) verified burn units and asked to provide an email address. Forty-nine out of the seventy ABA burn centers agreed to participate and provided an email address. Those forty-nine ABA burn centers were contacted to complete a seventeen-question electronic survey. Burn centers were also given the opportunity to participate in a follow-up survey/interview via email regarding the center’s current practice of prevention, diagnostic tool(s), and treatment of heterotopic ossification.</p> <p><b>Results:</b> Preliminary results based on completed survey responses (n=37), in combination with current limited research, suggest that there is a presence of HO on burn centers; however there appears to be inconsistent or sometimes no formalized standards of care for prevention and treatment of HO. In contrast to existing literature, which reports HO prevalence in burn units at 1-3%, this study’s findings</p>

	<p>suggests that actual HO rates are potentially double that figure. As anticipated, there is no consensus on how to prevent and treat HO. All respondents thus far have confirmed that HO is present at their respective burn center; however, approximately 70% of those burn centers report no prevention standard of care, and 65% report no treatment standard of care. Furthermore, the range of practiced prevention and treatment techniques appear inconsistent and contradictory (ie. aggressive range of motion (ROM) vs. gentle, pain-free ROM) and unguided due to limited evidence based research. The research team will continue to collect and analyze survey responses through July 2019.</p> <p><b>Conclusions</b> HO is a devastating complication to burn injuries that affects the physiological, emotional, and functional aspects of that person. This study continues to reiterate the call for more in-depth research into HO by demonstrating the variance and inconsistency of prevention and treatment of HO within the United States. Future studies can utilize the results from this survey to begin fabricating a standard of care/protocol for HO in burn centers.</p>
<b>Disclosures:</b>	<p>Emma DeJournette - No relevant financial relationships to disclose  Emily Kertcher - No relevant financial relationships to disclose</p>



