Health-care Costs of Orthopaedic Trauma Sustained in Combat

The health-care requirements associated with orthopaedic trauma in combat injuries compared with non-combat injuries are not clear.

Among individuals with combat injury

- Blast-related trauma (most common injury) 59%
- Injured individuals who underwent amputation 20%

Factors associated with health-care utilization

- ≥ 2 comorbidities
- Amputations
- Severe Injury Severity Score at presentation
- Junior enlisted sponsor rank (a proxy for lower socio-economic status)

Injuries with associated increase in health-care expenditures

- 43% increase in expenditure (Incidence rate ratio = 1.43; 95% CI 1.19–1.73)

Matched cohort study using TRICARE claims data

Combat trauma (n = 2,119) Non-combat trauma (n = 2,119)

- Survey of health-care utilization
- Total health-care expenditures over the post-injury period

Negative binomial regression analysis to identify the association between risk factors and health-care expenditures

Health-care costs are high among service members sustaining combat and non-combat orthopaedic trauma.

Combat-related orthopaedic injuries

43% increase in expenditure (Incidence rate ratio = 1.43; 95% CI 1.19–1.73)

Health-Care Utilization and Expenditures Associated with Long-Term Treatment After Combat and Non-Combat-Related Orthopaedic Trauma

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