

P113 Perceived social support following extremity trauma: Does sex matter?

Anna LeJeune¹, Hallie Berndt¹, Victoria Bourgeois¹, Jessica Rivera²

¹Louisiana State University Health Sciences Center, School of Medicine, New Orleans, LA, USA. ²Louisiana State University Health Sciences Center, Department of Orthopaedics, New Orleans, LA, USA

Objective: After traumatic injury, patients often struggle with daily activities and may rely on others during recovery. Orthopaedic trauma research has identified two patient-reported factors that influence recovery outcomes: perceived social support and self-efficacy. However, existing research frequently lacks detailed participant characteristics or primarily includes male subjects. This study examines how social roles and demographic features impact fracture patients' perceptions of self-efficacy and social support.

Methods: This ongoing prospective cohort study, conducted in an academic orthopaedic trauma clinic, includes adults aged 18-79 with at least one new extremity fracture in the last six weeks. Upon informed consent and HIPAA authorization, participants complete a demographic information questionnaire and three NIH PROMIS® Item Bank surveys: the General Self-Efficacy instrument and two short forms related to Emotional and Instrumental Support. Participant responses are rated on a 5-point Likert scale and are analyzed using linear regression, relative to normative population values, controlling for age, education, ethnicity, and caregiving roles.

Results: Currently 52 subjects have been enrolled, comprising of 66% male and 33% female. Of these, 25% report being a primary caregiver to a child or adult, and 38% indicated living with a spouse or partner. Compared to normative values for each survey, social roles and household composition did not affect patient-reported outcomes for female respondents. However, male patients indicated lower self-efficacy ($p = 0.014$, $\beta = -8.8$ [95%CI -15.7 - -1.9]) and higher instrumental support ($p = 0.049$, $\beta = 6.1$ [95%CI 0.03-12.1]) if there was a partner/spouse in the household. Additionally, emotional support was negatively associated with Hispanic/Latino ethnicity ($p = 0.049$, $\beta = -6.7$ [95%CI -12.7 - -0.6]).

Conclusions: While no predictors for female patient-reported outcomes were found, it does appear that there are perceived differences in social support and self-efficacy based on gender and social roles. Findings also suggest that certain ethnicities may experience decreased social support potentially due to cultural and societal influences on relationship dynamics. Further understanding the relationship between gender, self-efficacy, and social support will guide healthcare professionals in identifying patients at higher risk for recovery challenges and in connecting those patients with appropriate recovery resources.