

Characteristics of Inpatient Falls and Fall Related Injury

Lim Bee Chiu, MSc (Medical Statistics)¹, Fatimah binti Mahmud, BScH (Health Sciences)¹, Bunyamin bin Abdullah (MBBCh)², Muhammad Hazrul bin Badrul Hisham (MBBS)¹, Shanti Nalalingam (BNSc)³, Fariz Safhan bin Mohamad Nor (MMED)^{1,4}

¹Clinical Research Centre Hospital Tengku Ampuan Afzan, Ministry of Health Malaysia, Kuantan, Pahang, ²Quality Unit, Hospital Tengku Ampuan Afzan, Ministry of Health Malaysia, Kuantan, Pahang, ³Department of Nursing, Hospital Tengku Ampuan Afzan, Ministry of Health Malaysia, Kuantan, Pahang, ⁴Department of Nephrology, Hospital Tengku Ampuan Afzan, Ministry of Health Malaysia, Kuantan, Pahang

ABSTRACT

Introduction: To identify the characteristics of inpatient falls and associated factors with injury outcome within a hospital setting. **Methods:** A cross-sectional study of falls that occurred within inpatient settings was conducted. Data from the incident reporting team and medical records were collected for inpatient fall between 1st January 2017 and 31st December 2019, at Hospital Tengku Ampuan Afzan (HTAA). Pearson Chi-square or Fisher Exact test were performed to assess relationships between categorical variables. **Results:** A total of 44 fall incidents was analysed. Male patients fell most frequently (n = 24, 54.5%). Falls from the bedside were the most common (n = 23, 52.3%) and during the night shift from 9 pm until 7 am, (n = 18, 40.9%). The fall rate was 0.3 falls per 1000 patient-days among the hospitalised patients. Overall, the patients who fell experienced minor injuries (n = 23, 52.3%). The highest fall rate was noted in the surgical based departments (i.e., general surgery, neurosurgery, and orthopaedics) which was 0.71 falls per 1000 patient-days. Elderly patients (age 51 years and above) were more likely to sustain minor to major injury compared to other age groups (n = 16, 80.0%, P-value = 0.008). The associations between gender, time of fall, mental status, the department involved and injury severity were not statistically significant. **Conclusion:** This study provides a comprehensive review of the characteristics of fall events and injury outcome in HTAA over three years. Risk assessment and management plans should focus on education, particularly surrounding bed safety.

Methadone Substitution Therapy among Opioid Dependents: A Unicentric Experience

Karniza Khalid, MMedSc¹, Ooi Yit Tyse, MD², Qutbuddin Abdul Rashid, Cert², Muhammad Zul Azri Mohammad Yusoff, MMed(Psych)², Ruzita Jamaluddin, MMed(Psych)²

¹Clinical Research Centre, ²Department of Psychiatry and Mental Health, Hospital Tuanku Fauziah, 01000 Kangar, Perlis, Ministry of Health Malaysia.

ABSTRACT

Introduction: Methadone substitution therapy is aimed to improve the health and social performance of opioid-dependents. In view of the scarcity of data from Malaysia with regarding the effectiveness of the the program, we aimed to remedy this issue. **Methods:** This cross-sectional study involving data transcription from clinical records of active opioid dependents undergoing methadone substitution therapy for the year 2021 in Hospital Tuanku Fauziah, Perlis. Data collected include demographic variables, history of illicit drug use, trend in temporal modulation of methadone dosage, and co-use of illicit drugs. **Results:** There were a total of 87 patients, all males with the mean age of 43.9±8.33 years. Majority of patients had been diagnosed with Hepatitis C (n=54, 62.1%). Heroin was the most commonly abused substance prior to program enrolment (n=77, 88.5%), followed by kratom (n=45, 51.7%). For the earlier three years, majority of the patients had continued using illicit drugs during the program (n=51, 58.6%) with the urine spot test in 2019 yielding the highest recorded positive tests (n=32, 36.8%). Methamphetamine and amphetamine co-use were the commonest (n=12, 37.5%). Hepatitis C status was neither associated with the current methadone dose, U=539.5, p=0.186, nor the highest dose required, t=-0.291, df=74, p=0.772. We did not identify any predictive factors to successful drug abstinence during methadone substitution program. There was also a poor correlation between methadone dose and retention rates, r=0.22, p=0.042. **Conclusion:** Studies looking into potential factors that influence treatment retention and opioid abstinence during methadone substitution program is needed to optimize national cost for healthcare.