

Quality of Life in Long-Term Survivors of Intensive Care

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Abstract

Introduction: Traditionally, outcome from intensive care has focused on mortality. The cost of intensive care and the limited resources devoted to patients who have a poor prognosis also raises questions about the utilisation of such resources. There is increasing pressure for outcome evaluation of intensive care to incorporate assessment of long-term survival and the quality of life in survivors. The principal objectives of this article were to examine current methods of assessing quality of life measures in critically ill patients surviving intensive care and to determine the quality of life of these survivors. **Methods:** Direct and computerised search of published research articles. **Results:** Measurement of quality of life after intensive care is not common practice. There is a lack of consensus concerning appropriate measuring instruments to be used and how best to interpret results. Despite the availability of general outcome tools and disease specific instruments, there is a paucity of studies in the literature which include assessments of quality of life following intensive care unit (ICU) care. Generic health indices suggest that the quality of life in ICU survivors is acceptable though in certain sub-groups, e.g. adult respiratory distress syndrome and sepsis, quality of life may be moderately impaired. ICU survivors appear to suffer less disability than chronic physical disease patients. **Conclusions:** Assessment of outcome after intensive care should include health related quality of life measurements. A unifying framework is required to enhance communication between clinicians, administrators and investigators of quality of life research and also to enable more rational and effective decision making at the bedside. Patients who survive intensive care appear to enjoy a reasonable standard of quality of life. While their health status may not be as good, subjectively patients find this acceptable.

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