

Introduction The process of amputation is defined as the surgical removal of part of the body, such as an arm or leg. Traumatic amputations may be done when a limb cannot be salvaged after an accident or injury. Rehabilitation succeeding the operation is a crucial part of the entire recovery process, but assessing the patients' mental health, such as anxiety and depression, is also extremely important. In traumatic amputations, patients grieve for a huge and sudden loss. Such a degree of abrupt disturbance may pose the patient at a higher risk of depression. Results from studies using the Hospital Anxiety and Depression Scale (HADS) were included.

Objectives To determine and compare the prevalence of depression between patients with upper and lower traumatic limb amputations.

Methods A literature search of electronic databases including PubMed, Medline, Embase, Cochrane Library, and CINAHL was performed. Searches were included from January 2000 using the terms 'amputation', 'depression' and 'HADS'.

Results Data from 889 participants were used and the mean age for all participants was 49.4 years. It was shown that HADS depression and anxiety scores are higher in traumatic upper limb amputations than in lower limb amputations. In upper limb amputations, the mean depression and anxiety scores were 5.30 ± 1.24 and 7.46 ± 1.30 , respectively. In lower limb amputations, the mean depression and anxiety scores were 4.50 ± 0.28 and 5.73 ± 0.93 , respectively.



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Conclusion Data shows slightly higher HADS depression and anxiety scores in traumatic upper limb amputations compared to lower limb amputations. However, factors such as the ratio of males to females in the study, socio-economic background of the participants, etc., should be taken into consideration as well. Nevertheless, psychological support is a crucial part of rehabilitation for post-traumatic amputees.