## Implementazione di un ambulatorio di follow-up post ricovero intensivo

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Argomento: Altro

**Background**: critical illness has an impact on an individual's long-term health status and quality of life (QOL). Copious literatures describe these aspects, in particular the Post Traumatic Stress Disorder (PTSD), a reactive disturb of the psychological sphere, as a result of ICU stay.

**Objective**: the first aim of this study is to evaluate the impact of ICU hospitalization after patients' discharge.

**Methods**: we collected data from January to December 2018. The follow up program is structured in 4 time points: enrolment and evaluation at seven days, three and six months after ICU discharge. Test performed during follow up : CAM-ICU, PTSS-10, HADS, Barthel Index, MUST, EuroQol-5D and six minutes walking test.

**Results**: At seven days, patients that had positive HADS have shown significative median longer time of intubation 6 (IQR: 4-9) vs 11(6-19) (p=0.048) and median LOS 8 (6-14) vs 13 (8-27) (p=0.023). At three months we observed a significative relation between positive HADS and median value of **EuroQoI-5D (85/IQR :80-90 vs 50 /IQR :50-70 - p=0.048)**. This effect has been lost at six months.

At six months patients that had a positive PTSS-10 were significative younger than the other group (60 - IQR: 53-67 vs 44 - IQR :39-57). In particular, this small group of patients reached just sufficient level of QOL described by EuroQol-5D (median : 50 - IQR : 50-100).

**Conclusions**: our experience suggested that longer time of intubation and LOS are associated to higher level of anxiety and depression symptoms during the immediate time after discharge. This trend improves in the following months with a reduction of these symptoms associated to a progressive recovering of the activities of daily living. In a small part of sample, including younger people, PTSD symptoms become consolidated at six months associated to worst level of QOL.