Assessing self-reported recall of unintentional musculoskeletal injuries in Naval Special Warfare Operators

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Background/Purpose: Self-reported data are often used in injury epidemiology studies, but they are prone to issues with recall. The aim of this analysis was to assess the self-reported recall of unintentional musculoskeletal injuries among Naval Special Warfare (NSW) Operators, and identify factors affecting recall.

Methods: Injuries obtained from self-reports and medical records among 101 NSW Operators (age 28.5 ± 5.6 years) were matched by anatomic location, injury side (for extremity injuries), injury year and type. Recall was expressed as the percent of medical record-reviewed injuries correctly recalled in the self-report. Injuries were classified as recent (≤ 4 years since injury) or old injuries (> 4 years since injury). Proportions were compared using Fisher's exact tests.

Results: A total of 374 medical record injuries were reviewed. The most common location for injury was the lower extremity (54.5%). Common injury types were strains (16.6%) and sprains (13.4%). Recall was generally low (20.6% on matching location and year, 12.0% on matching location, year and type). Recall depended on injury severity and time since injury. Recall was higher for traumatic fractures as compared to less severe non-fracture injuries (p < 0.05). Recall for non-fracture injuries was higher for recent as compared to old injuries (p < 0.05). This effect of time on recall was not observed for fractures (p > 0.05).

Conclusion: Self-reported recall was generally low, and was influenced by injury severity and recall time. Further investigation of factors affecting recall of injuries and methods to improve recall in this population is necessary.