```
(
                                                        (Sequential)
    (
            / )
                              (Post Traumatic Stress Disorder)
                                       PTSD
                                                                                .(P= / )
                                                                                 PTSD
       (
                  )
```

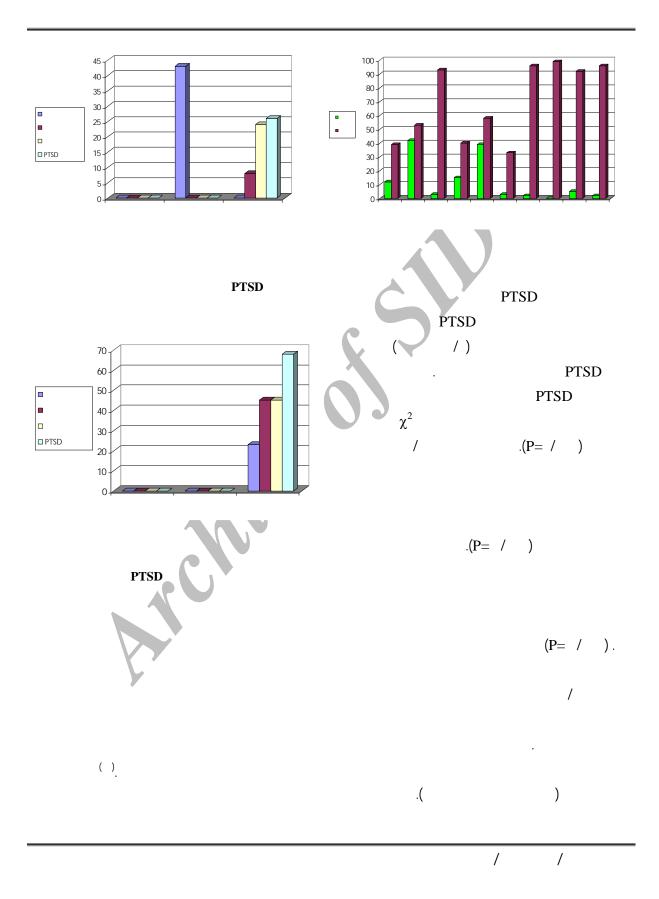
() () (). () (). (). () - (). () PTSD ()

```
()
                PTSD
                 )
                                                                            Ehde
        )
                                   (Sequential)
                                                                       .(P < \ / \ )^{\,(\ )}
                                                                                           ( )
PSS-I(PTSD symptom scale – Interview)
                                                                                          ( ).
```

/

/

```
( )
( / ± / )
                                                 PTSD
                       (Diagnostic Statistical Manual of Mental Disorder) DSM-IV
                                                 PTSD
                           PTSD
                                 PTSD
                                                      ) PSS-I
                )
```



().(P= /)

Fauerbagh.

Faber Tall

()

Illechuk Sunny

Dawn

- 1- Morgan J. Ambulatory management of burns. Am Family Physician; 2000. 62: 2015-2026.
- 2- Smeltzer SC, Bare BG, Branner and suddarthis, text Book of Medical surgical Nursing. 10th ed. Philadelphia: Lippincat Willams & Wilkins; 1999. P.1704.
- 3- Phipps WJ, Sands JK, Smark JF. Medical Surgical. London: Mosby; 1999. P.2109.
- 4- Tall L, Faber AW. Posttraumatic stress and maladjustment among adult burn survivors 1 to 2 years pot burn. Burns; 1998. 24: 399-400.
- 5- Nutt D, Davidson T, Zohar J. Posttraumatic stress disorder. London: Martin Dunitz Ltd; 2000. P.17-19.

PTSD

PTSD Ehde

()

Tarrier Wisely

PTSD

Tarrier

()

.

www.SID.ir

- 15- Ehde DM, Dawn ME, Wiechman SH, Wilson LG. Posttraumatic stress symptoms distress following acute burn injury. Burns; 1999. 25: 587–592.
- 16-Vanloey N, Faber AW, Tall LA. Do burn patients need, burn specific multidisciplinary out patient after care. Burns; 2000. 27: 103–110.
- 17-Menzies V. Depression and burn wounds. Arch psychiatr Nurs; 2000. 14(4): 199–206.
- 18- Sunny T, Tllecbuck WA. Psychiatry of the medically ill in the burn unit. psychiatry in the medically ill; 2002. 25(1): 129–143.
- 19-Tarrier N. Psychological morbidity in adult patients: Prevalence and treatment. J Ment Health; 1995. 4(1): 51-62.
- 20-Wisely J, Tarrier N. A survey of the need psychological input infallow—up servise for adult burninjured patients. Burns; 2001. 27: 801–804.
- 21- Fauerbach JA, LindaRichter JW. Regulating acute posttraumatic distress. Burns Care Rehabil; 2002. 23(4): 224–257.

- 7- Lari AR, Alaghehbandan R, Nikui R. These patients also regure greater care than most other patients both during hospitalization and as outpatients: with both medical and social problem. Burns; 2000. 26(1): 49-53.
- 8- Badger J. The psychological aspect. Burns; 2001. 101(11): 38-41.

10-Fowler A. From victim to Sarvivar, Nurs Standard; 2001. 15(34): 63.

- 12-Yehuda R. Posttraumatic stress disorder, NewEngland J Med; 2002. 346: 108 113.
- 13- Shakespeare V. Effect of Small burn inyury on physical, social and psychological health at 3-4 months after discharge. Burns; 1998. 24: 739–744.
- 14- Hamoui Y. Posttraumatic stress disorder in burned pations. Burns; 1999. 28: 647–65.

The Comparison of the Rate of Posttraumatic Stress Disorder in Minor and Moderate Patients with Burn

Z. Andy, MSc³² F. Sahbaei, MSc³³ M. Mahmoodi, PhD³⁴

Abstract

The injury due to the minor and moderate burn is allocated highest rates of intense nursing. There is possibility of posttraumatic stress disorder (PTSD) among the burned patients. This study is performed with the aim of determination and comparison rate of PTSD in two groups of minor and morderate burn.

This was a comparative cross-sectional study. Eighty patients with burn injury were studied in two groups. Group 1, injured with minor (Less than 15% TBSA) and the group with moderate (15-25% TBSA) burn injury was included in the second group. The sampling method was sequential and the study was conducted from March to July 2006. A questionnaire was used for assessing the rate of PTSD that completed by an interview with the subjects.

The study findings, showed that the highest rate of PTSD occured in the moderate burn (47.5%). There was a statistically significant relationship between the rate of PTSD and moderate burn (P=0.024) in patients.

It seens that, severity of burn indicate the rate of PTSD (posttraumatic stress disorder). This is very important matter that injured patients should be detected as soon as possible to receive appropriate nursing care plan. With a view to PTSD recognition, implementation of care plan must be initiated appropriately.

Key Words: PTSD, Minor burn, Moderate burn

³⁴ Professor, School of Health, Tehran University of Medical Science, Tehran, Iran.

³² MS in Mental Health Nursing Instruction, Burn ICU Ward's Motahary Burn and Events Hospital. (Corresponding Author)

³³ Senior Lecturer, School of Nursing and Midwifery, Azad Islamic University, Tehran Medical Unit, Tehran, Iran.