

OT1-04

Help Seeking Behavior and Implication on Health Service Provision of Post Nonfatal Unintentional Household Injury Patterns in Hong Kong

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Introduction: Health seeking behaviors and preferences for health care location after nonfatal unintentional household injury have not been examined in urban settings. This study explores help seeking behavior of people who have incurred non-fatal household injuries in Hong Kong. We examine individual choice and preference for medical care service provision after home based injury. Predictors and implications of injury prevention and health service delivery are discussed.

Methods: An anonymous, population-based, cross-sectional telephone survey study was conducted in March-May 2009 (n=6500). A modified, Chinese questionnaire based on WHO Guidelines for Conducting Community Surveys on Injuries and Violence was used for data collection. Descriptive and multivariate analysis was conducted to identify predictors of health service utilization and to examine help-seeking behavior post-non-fatal unintentional household injury in general population. **Results:** Results indicated 43% of population with injury received no help, 43% relied on self-care as first aid, and bone setters (36%)/traditional herbalists (28%) are more common than the Western medical practitioners (private general practitioners 12%, A&E 12%) as the help obtained after household injuries. Proximity (46.4%) and trust (17.9%) were cited as the main factors in the choice of care; 77% of population required 2nd treatment post injury. Predictors for health service location were examined and discussed.

Conclusion: Predictors for health service utilization, mode and location of health services providers were identified. Injury prevention program and service providers should target on specific injury as well as the socio-demographic subgroups.

OT1-05

Trend and Implication of Helmet Use Six and Twelve Months after Helmet Regulation in Central Vietnam

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In Vietnam, Road Traffic Accidents (RTA) is being serious problem. In order to decrease RTA cases, helmet-wearing was made compulsory for riders and passengers driving on all roads from December 2007.

Objectives: Assess helmet-wearing six and twelve months after the regulation in three central provinces of Vietnam (BinhDuong, YenBai, DaNang). **Method:** Road side observations were made on classes of road using 5 sites in each province. Two researchers observed wearing-helmet, one observing riders, the other

passengers. Observations were made on one weekday and one weekend (non consecutive), 4 times per day: 7:00-9:00, 10:00-12:00, 16:00-18:00 and 19:00-21:00. Helmet-wearing and incorrect use (helmet strap not fastened) were recorded for riders and passengers. **Results:** Helmet-wearing was higher after enforcing the regulation. However, comparing the 6 and 12 month observations helmet-wearing among riders decreased from 93.9% (June) to 88.1% (December) in YenBai; increased from 94.6% to 96.9% in BinhDuong and leveled off 99.7% in DaNang. Helmet-wearing among passengers fell from 90.5% to 78.5% in YenBai; from 98.8% to 90.2% in DaNang and rose from 88.7% to 94.6% in BinhDuong. In YenBai and DaNang, helmet-wearing among riders and passengers fell at 4 observation times. Incorrect wearing among riders and passengers increased in 3 provinces. **Conclusion:** The regulation had a positive impact on helmet-wearing in three provinces. However, incorrect use is rising in riders and passengers. This trend and the reasons behind are likely significant for Vietnam and other countries introducing regulation. Possible causes and policy implications of this trend will be explored as likely remedies.

OT1-06

Risk Factors for Hip Fractures in Elderly People in Taiwan

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Hip fractures are the most serious consequence in elderly fallers, and more than 90% of them result from falls. It is necessary to identify risk factors for hip fractures in the elderly before any effective intervention can be undertaken; however, these factors have not been determined in Taiwan. A case-control study was conducted to determine risk factors for hip fractures in elderly people. As recruited from the emergency rooms of three hospitals in Taichung area, persons aged 65 or older who fell and sustained a hip fracture were selected as cases and those who fell and had an injury other than hip fractures as controls. In the study, there were 336 cases and 479 controls. The result of the logistic regression model analysis shows that the risk of occurring a hip fracture during a falling event was significantly associated with older ages, poorer vision, osteoporosis, use of medication of lowering blood sugar levels, type of falls, falling direction (the side and backwards), and long lie after a fall. Most of risk factors identified in the study are consistent to those reported in previous studies; however, some are in conflict possibly due to environmental or racial differences. Factors such as poorer vision, use of medication, and fall direction can be modified or trained in order for reducing the occurrence of hip fractures during a fall in the elderly.