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Letter to Editor

Barriers to Rehabilitation among Road Traffic Accident Survivors in Karachi: Clinical Reflections from a Public Sector Setting

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Letter

Road traffic accidents (RTA) constitute a major cause of trauma related disabilities in the country, especially in large urban centres such as Karachi. Patients surviving neurological and orthopedic injuries often require extensive care in the form of physiotherapy to regain their strength, mobility and independence. However, adherence to physical therapy during the recovery period in hospitals remains inconsistent.

Prior studies in Pakistan and similar low resource countries also link flaws of administration, patient perception and socioeconomic factors to inconsistent outcomes.[1,2,4] This letter aims to highlight the obstacles commonly faced by the patient's requiring physiotherapy in Karachi public sector hospitals and relates them with available research in the same domain. During clinical training in orthopedic and rehabilitation medicines in a tertiary care public hospital, repeated challenges were observed that serve as significant barriers to compliance with rehabilitation.

In Karachi crowded OPD long waiting lines dependent on daily income from labour seem to hinder the opportunities. although no official data was collected and no patient identification mark is mentioned, in formal phonic conversation revealed that patient discontinue physiotherapy prematurely due to financial constraints, loss of daily earnings,[1,2] fear of losing job due to which they had to return to physically demanding jobs despite of incomplete recovery.[2,4] Difficulty in travelling long distances and high transportation costs.[5]

Since some patients believed physiotherapy was unnecessary once pain reduced or surgical healing occurred, misconceptions, ignorance, and limited awareness were also apparent. Overcrowded OPD, lack of family or social support also affected adherence. Moreover, delayed healing, slow progression, pain during exercises led to frustration and lack of motivation was also evident especially in survivors with spinal injuries.[1,2,4]

These observations mirror both Pakistani and international studies identifying the aforementioned factors as key causes of discontinuation.[1-4] Additional obstacles faced by RTA patients include long rehab durations and an urgent need to return to work which further adds to early discontinuation of physiotherapy, inadequate functional recovery and higher risk of long-term disability. In Karachi rehabilitation compliance among RTA patients is heavily influenced by various socioeconomic, structural and psychosocial factors. To increase rehab adherence efforts should focus on affordable interventions like written home exercise guidelines, short discharge counselling, and scheduled follow up consultation. Furthermore, these measures could help offset the negative impact of transport and workplace constraints on physiotherapy adherence in low resource settings and may help reduce chances of chronic disability.

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