

Patient Education Material

Diagnosis: Spinal Cord Injury

A spinal cord injury results from trauma to the spinal cord. If spinal cord injury is suspected the individual is examined by a physician and X-rays of the spine are taken to determine extent of the damage. Other tests may be performed such as a CT scan, MRI, and myleogram.

Definition:

Chances of survival after a spinal cord injury depend on the level of the injury, as well as quick medical treatment after an accident. A spinal cord injury at the neck level may impair a person's breathing and paralyze arms, legs, and trunk (quadraplegia). Injury to the lower spine may cause weakness and loss of movement or feeling in the legs and lower parts of the body (paraplegia). A severed spinal cord cannot be repaired.

In less severe cases recovery depends on the extent of damage. Typically prospects for recovery are good if you are able to move or feel sensation within one week of the injury. Once the injury has healed, rehabilitation including physical and occupational therapy assists the injured person to live independently with the disability.

Signs & Symptoms:

Symptoms of spinal cord injury usually appear immediately after injury. However, symptoms can develop slowly if an infection or tumor is gradually increasing pressure on spinal cord.



Symptoms of a spinal cord injury may include weakness, poor coordination, or paralysis below the level of the injury. Other symptoms may include numbness, tingling, loss of sensation, loss of bladder and/or bowel control, and pain.

Incidence:

Approximately 10,000 new spinal cord injuries are diagnosed every year as many as 450,000



Americans live with spinal cord. More than 80% are men ages 16 to 30. Motor Vehicle accidents are responsible for 48% of spinal cord injuries, followed by 15% caused by violence, 21% caused by falls, and 14% caused by sports injuries (typically diving accidents).

Treatment (Medications, therapy, surgical procedures):

Immediate treatment of a spinal cord injury includes stabilizing the spine and treatment with corticosteriods to limit damage and improve chance of recovery. Surgery may be needed to stabilize the spine. If indicated surgery may involve fusing together vertebrae, inserting metal pins, removing bone chips, bullets or other objects, or to drain fluid for pressure relief. The individual with a spinal cord injury may require traction and bed rest to immobilize the back while it heals.

Do's & Don'ts (precautions, diet restrictions, risk factors/prevention):)

Since spinal cord injury results in a lack of feeling and sensation, some parts of the body may develop complications. Complications may include a loss of bladder and bowel control, increased risk for urinary track infections, impotence, sexual dysfunction, skin breakdown, pressure sores, spasticity, blood clots, osteoporosis, and cardiovascular disease due to decreased physical activity.

To reduce the risk of complications it is important to follow the advice of your physician. Also it is important to follow skin inspection programs, pressure relief for buttocks and back, and participation in physical activity with uninvolved body parts, for example an upper body therapeutic exercise program.

Support Groups:

Psychosocial support for individuals with spinal cord injury is a key factor in successful rehabilitation. Support groups which provide emotional support, education, and further information regarding spinal cord injuries are listed below.

National Spinal Cord Injury Association 545 Concord Avenue, Suite 29 Cambridge, MA 02138 617-441-8500 http://www.spinalcord.org

Spinal Cord Society Wendell Road Fergus Falls, MN 56537 218-739-5252 NH Spinal Cord Injury Association PO Box 197 North Salem, NH 03073 603-479-0560 http://www.nhspinal.org

Further Info: (Web site addresses, phone #'s, etc.):

http://www.spinaltimes.com/hl_surround.htm http://www.nhspinal.org http://www.spinalcord.org

For more information, please contact: Department Name Phone Number and Extension