

Spinal cord injury patients face many serious health problems besides paralysis

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Paralysis is just one of the many serious health problems faced by patients who suffer spinal cord injuries.

Spinal cord patients also are at higher risk for [cardiovascular disease](#); pneumonia; life-threatening [blood clots](#); bladder, bowel and sexual dysfunction; constipation and other gastrointestinal problems; [pressure ulcers](#); and chronic pain, according to a report published in the journal *Current Neurology and Neuroscience Reports*.

The article, "Systemic Complications of Spinal Cord Injury," is written by Loyola Medicine neurologists Rochelle Sweis, DO, and José Biller, MD. Dr. Sweis is an assistant professor and Dr. Biller is professor and chair in the department of neurology of Loyola University Chicago Stritch School of Medicine.

As many as 94 percent of [spinal cord](#) patients suffer chronic pain.

"It typically occurs within the first year after [injury](#) but decreases in intensity and frequency with time," Drs. Sweis and Biller wrote. "It affects patients emotionally and interferes with activities of daily living."

The most common causes of spinal cord injuries are motor vehicle accidents (46 percent), falls (22 percent), violence (16 percent) and sports injuries (12 percent). Alcohol intoxication plays a role in 25 percent of all spinal cord injuries.

Eighty percent of spinal cord injuries occur in males aged 15 to 35. Fifty-three percent of spinal cord injury patients are left tetraplegic (partial or total paralysis of the arms, legs and torso) and 42 percent are left paraplegic (partial or total paralysis of the legs).

It costs between \$320,000 and \$985,000 to treat a spinal cord injury patient the first year and as much as \$5 million during the patient's lifetime.

Mortality is highest during the first year after injury and among patients with more severe injuries. Life expectancy has not improved during the past 30 years.

The most common systemic complications following [spinal cord injuries](#) are pneumonia and other pulmonary problems. Cardiovascular disease is the most common cause of death. The degree of cardiovascular dysfunction is directly related to the severity of the injury.

Spinal cord patients are at risk for life threatening blood clots called [deep vein thrombosis](#) (usually in the legs) and pulmonary embolism (lungs). Deep vein thrombosis occurs in 47 to 90 percent and pulmonary embolism in 20 to 50 percent of spinal cord patients.

Pressure ulcers also are common. They can be avoided by position turns ever two hours, air mattresses and periodic weight shifting while sitting.

Life expectancy depends on the severity of the injury, where on the spine the injury occurs and age. Life expectancy after injury ranges from 1.5 years for a ventilator-dependent patient older than 60 to 52.6 years for a 20-year-old patient with preserved motor function.

Fatal complications of spinal cord injury include blood clots and sepsis due to pneumonia, urinary infections or pressure sores.

The good news is that among patients who are not completely paralyzed, 80 percent stand by 12 months and 50 percent walk out of the hospital by 12 months, with improvements continuing for two years after injury.

New treatments for spinal cord injury, including stem cells, gene therapy and electrical stimulation, are being studied. "The hope is that these options can some day restore some function for [patients](#)," Drs. Sweis and Biller wrote.

More information: Rochelle Sweis et al, Systemic Complications of Spinal Cord Injury, *Current Neurology and Neuroscience Reports* (2017). [DOI: 10.1007/s11910-017-0715-4](https://doi.org/10.1007/s11910-017-0715-4)

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