

Research Brief



HEALTH, EMPLOYMENT & LONGEVITY PROJECT

Chronic Health Conditions among people with spinal cord injury (SCI)

What is the study about?

Chronic health conditions (CHCs) are a leading cause of death in the general population. These include heart disease and respiratory disease. Among persons with spinal cord injury (SCI) there has been more research focused on conditions that are secondary or indirectly resulting from SCI, such as pressure ulcers and urinary tract infections. Whereas these secondary conditions may come and go, chronic health conditions are more likely to get worse over time and with age. It is important that we understand the risk of CHCs among people with SCI. Our purpose was to assess lifetime prevalence of 7 CHCs among a cohort of adults with SCI whose injuries occurred years or even decades earlier.

Who participated and how was the study conducted?

There were 1689 participants in our study who were identified through a large specialty hospital in the Southeastern United States. They averaged 15.9 years since SCI onset and were average of 48.4 years of age at the time of the study. Participants completed a self-report questionnaire about how they were doing and the types of problems that they were experiencing. Chronic conditions were measured using questions used by the Centers for Disease Control (CDC) to monitor health in the general population.

What did the study find?

We reported the lifetime prevalence of 7 different CHCs in a cohort of persons with SCI. We did not find relations between injury level and ambulatory status with heart attack, stroke, or cancer. Compared with the general population, those with SCI reported higher rates of diabetes (11.9% vs 9.9%) but lower rates of hypertension (28.7% vs 32.4%) and high cholesterol (29.2% vs 37.3%). Rates were similar for heart attack (3.4% vs 4.2%), coronary artery disease (3.6% vs 4.5%), and stroke (3.3% vs 3.3%).

Implications and/or recommendations?

There is a need to investigate how health screenings, health behaviors, and socioeconomic status relate to the development of CHCs after SCI. Clinicians should be aware of the risk of CHCs in persons with SCI and screen for those conditions, even if the risk is not substantially different than the general population. It is easy to overlook the importance of CHC because of the concern about pressure ulcers and urinary tract infections which have important consequences for people with SCI. Individuals with SCI needto lead a healthy lifestyle to prevent CHCs and maintain the highest possible level of health and quality of life. Preventing CHC or delaying the development of CHC is important for people with SCI. It is important to do healthy activities, like good nutrition and exercise, whenever possible. It is also very important to avoid high risk activities, particularly smoking. It is important to remember that this is just one steady and it is based on self-report only. So it is important to be aware of any new research on CHC, including studies that use other sources of data.

Reference:

Saunders, L. L., Clarke, A., Tate, D., Forchheimer, M., & Krause, J.S. (2015). Lifetime prevalence of chronic health conditions among persons with spinal cord injury. Archives of Physical Medicine and Rehabilitation, 96(4),673-679.

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