Health Employment and Longevity Project Newsletter



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Just in time for National Disability Employment Awareness Month!

October is National Disability Employment Awareness Month (NDEAM), calling attention to the accomplishments of people with disabilities in the area of employment, educating about the value of a diverse workforce inclusive of disabilities, and drawing attention to the inequities that exist for workers with disabilities. People with disabilities not only are less likely to be employed but are often employed at lowpaying jobs with little opportunity for career advancement.



We are excited to report that we received a new grant that started on September 1, 2021, to look at quality employment throughout the work lifecycle for people with spinal cord injury (SCI), multiple sclerosis (MS), and stroke. This project builds upon a preliminary study we conducted beginning in 2012 and extends the work to people with stroke, many of whom are injured within the working age range.

The importance of the project is that we focus on the **quality** of employment, rather than simply counting the number or portion of people who are employed. Our fundamental belief is that people with disabilities need fair compensation, benefits, and career opportunities, rather than simply a job. This requires identifying and eliminating inequities in employment for people with disabling conditions.

Our work will help us to better understand the quality of employment, how it changes over time, how the COVID-19 pandemic has affected employment in those with disabilities, and what can be done to improve employment outcomes. We will work to get policymakers to consider quality employment for people with disabilities as a fundamental outcome.

Dr. Krause and Dr. Newman's Webinar on Social Isolation and SCI

Since the start of the COVID-19 pandemic, all of us have experienced the changing nature of social connections, and many of us have gained personal insight into what it means to be socially isolated, lonely, or both. On July 8, 2021, Dr. Jim Krause and Dr. Susan Newman presented a WEBINAR: Social Isolation and Spinal Cord Injury (SCI)—Findings from the 50-year SCI Longitudinal Aging Study sponsored by the National Institute on Disability, Independent Living, and Rehabilitation Research.

To learn more about social isolation and SCI, check out the webinar at the following link: <u>https://youtu.be/WSksQNLdto4</u>

Research Brief - Opioid Use Among Individuals With SCI: Prevalence Estimates Based on State Prescription Drug Monitoring Program Data

What did we study?

Due to the current opioid epidemic, there has been an increased focus on opioid use and risk of harmful outcomes (opioid misuse, overdose, and death) among those with spinal cord injury (SCI). Individuals with SCI commonly experience secondary health conditions, including pain, spasticity, and depression, which may involve treatment options with high-risk prescription medications. Our purpose was to identify the frequency of opioid use among the 503 people in our study with chronic SCI living in South Carolina. We focused on opioid prescription fills, prescribed dosages, and patterns of fills among a cohort of individuals with chronic SCI (>1y postinjury) by linking administrative records from 2 statewide databases.

What did we find?

- Over half (53.5%) of the 269 study participants filled at least 1 opioid prescription during their second or third year after SCI.
- In total, there were 3386 opioid fills during the 2-year study.
- The average daily morphine milligram equivalents (MME) per prescription fill was 58.9.
- On average, the total number of days supplied by opioid prescriptions over the two years was 293±367.
- The average coverage period (from the first day a prescription was filled, until the last day they had medication on hand) was 389±290 days. The average daily MME during the coverage period was 41±70 MME.
- Of those who filled an opioid prescription, 23% had high-risk fills (>50 MME), and 38% had concurrent prescriptions for benzodiazepines, sedatives, or hypnotics.

What can I do?

We found a high usage of opioid prescription fills, as well as high dosages (MME) among individuals living with chronic SCI in South Carolina, higher than observed in the general population. The rates of high-risk fills, based on MME and concurrent benzodiazepine, sedative, or hypnotic use, place these individuals at increased risk for adverse outcomes. Taken together with earlier findings, this data may be used by health care providers and researchers to assess and monitor opioid use better, decrease concurrent high-risk medication use, and reduce the risks of harmful outcomes, including misuse, overdose, and death.

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Reference: DiPiro N, Murday D, Corley E, DiPiro T, Krause JS, Opioid Use Among Individuals With SCI: Prevalence Estimates Based on State Prescription Drug Monitoring Program Data, *Archives of Physical Medicine and Rehabilitation*, *102*, 828-834.

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Participant Milestone



In this issue, we are highlighting Barbara Armour, an SCI disability advocate, who is reaching 65 years of living with an SCI in 2021! In 2015, our team awarded her the Longest SCI Survivor Award at the 40-year celebration of our Aging Study.

New Mobility Magazine article:

https://www.newmobility.com/2015/08/gathering-of-sci-survivors/

Resource Highlight

Travis Roy Foundation is dedicated to helping spinal cord injury survivors and their families live more independent and hopeful lives. Injured survivors are empowered through their "Quality of Life Grant Program", which supports independence through small grants; and funds medical research to enhance the future for people managing paralysis after a spinal cord injury.



Check them out: https://www.travisroyfoundation.org/sci/grants/



Please feel free to contact us:

Health, Employment, and Longevity Project College of Health Professions 151-B Rutledge Ave Charleston, SC 29425 843-792-2605 aust@musc.edu

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