

SCI Unintentional Injury Calculator

Instructions

To use our spinal cord injury (SCI) Unintentional Injury Calculator, please visit the following link:

https://chp.musc.edu/research/help/tools/unintentional-injury-calculator

Once on the webpage, choose the version of the calculator that applies to you: (1) person with SCI/family/friend or 2) healthcare professional) and answer all the questions. After all questions have been answered, click the button "calculate". From there, your personalized risk results of having a unintentional injury within the next 12 months will appear. The healthcare professional version of the calculator has additional information for people who are interested in a more detailed breakdown of the results.

The result from this calculator is an estimate of risk of having a unintentional injury. This calculator is solely to help people understand how various factors including **non-prescription substance use, binge drinking, and the use of prescription medications** affect your potential risk for a fall related unintentional injury. These estimates reflect the average experience of a group of similar individuals and are based solely on the factors below. Many other factors can also influence your risk of a unintentional injury.

Unintentional injury calculator factors:

- 1. Gender
- 2. Current age
- 3. Years post-injury
- 4. Walking status
- 5. SCI injury level cervical, thoracic, lumbar, sacral
- 6. Race-ethnicity
- 7. Family Income
- **8.** Weight status (e.g., underweight or overweight)
- **9.** Considering all types of alcoholic beverages, how many times during the past month did you have five or more drinks on one occasion?
- **10.** Use of non-prescription substances (i.e., cannabis, cocaine, amphetamine type stimulants, inhalants, sedatives or sleeping pills, hallucinogens and opioids) in the past 3 months
- 11. Prescription drug use for spasticity in the past 12 months
- 12. Prescription drug use for pain in the past 12 months
- 13. Prescription drug use for depression in the past 12 months

Try calculating different risk results by changing the answers provided above to see how it affects your potential risk for a unintentional injury. Do not use this in instead of seeing a healthcare provider. If you have concerns for your mental or physical well-being, please contact a service provider with clinical expertise in your area.

Frequently Asked Questions

Does your race, age or gender affect your probability of having unintentional injuries?

- If you are a male, you are at higher risk for unintentional injuries, comparing to females.
- If you are non-Hispanic Black, you are at higher risk for unintentional injuries, comparing with others.
- The younger you are, the higher risk you have for unintentional injuries.
- The more years post injury you are, the higher risk you have for unintentional injuries.

Does taking non-medical substances affect my risk of unintentional injuries?

• If you have taken any non-medical substances, such as cannabis, cocaine, amphetamine type stimulants, inhalants, sedatives or sleeping pills, hallucinogens, and opioids, in the past 3 months, you are at higher risk for unintentional injuries, comparing with those who do not.

Does drinking alcohol affect my risk of unintentional injuries?

- People who frequently do heavy drinking or binge drinking of five or more drinks during a single occasion may have reduced life expectancy due to unintentional injuries.
- If you have six or more occasions drinking five or more drinks within the last month, you are at higher risk for unintentional injuries, comparing with those who do not.
- The more frequent the heavy drinking, the greater the risk.

Does prescription medication use affect your probability of have unintentional injuries?

- The more often you use prescription medication to treat pain or depression, the higher risk you have for unintentional injuries.
- If you have ever used prescription medications to treat symptoms other than for which they were intended, you are at higher risk for unintentional injuries, comparing with those who do not.
- Decreasing how often you use prescription pain or depression medication has been found to result in reduced risk of unintentional injuries. This does not mean individuals should stop or cut back on their prescription medication use based on these findings. Individuals with SCI who take prescription medications should consult their physicians or healthcare providers before making any changes.

Should I base my health care decisions on this or other fact sheets?

No, the information is only to help you understand what we know about the risk of having unintentional injuries. These
estimates should be used for general knowledge only. Do not use this in instead of seeing a healthcare provider. If you have
concerns for your mental or physical well-being, please contact a service provider with clinical expertise in your area.

Check out our other resources, available on our team website: https://chp.musc.edu/research/help/tools.

If you have any questions, feel free to contact me, James Krause, PhD (Principal Investigator), at 843-792-1337 (krause@musc.edu) or Richard Aust (Project Coordinator) at 843-792-2605 (aust@musc.edu).