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Trends in pressure injury development in patients with lower motor neuron and upper motor neuron lesions: A retrospective descriptive study

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Article that was published in Wound Management & Prevention Persons with spinal cord injury (SCI) are at high risk of pressure injury (PrI) development. This retrospective descriptive review will explore the effect of injury patterns (upper motor neuron [UMN] or lower motor neuron [LMN]) on PrI risk. Persons with neurological levels T8 and below, any type of SCI motor ability, and who were treated at a specialized outpatient SCI rehabilitation center in Baltimore, MD, between January 1, 2013, and December 31, 2019 were included. Of the 602 records examined, 194 were complete and met inclusion criteria. Most patients (119, 61.34%) were male and classified in the UMN group (162, 84%). Mean age and time since injury were 35.20 ± 18.78 and 6.20 ± 7.62 years, respectively. Seventy-three (73) of 194 patients (37.6%) had, or had a history of, a PrI; 21 (66%) in the LMN and 52 (32%) in the UMN group ($X^2 1 = 12.8$; $P < .001$). Statistically significant differences were noted between patients with LMN and UMN for the following: Braden Scale scores, age, body mass index, Spinal Cord Independent Measures-III, and time since injury. More patients in the LMN group had motor complete injuries (ISNCSCI levels A/B ($P < .001$)) and were non-ambulatory ($P < .001$) compared to those with UMN. The results of this study confirm that patients with SCI

have a high rate of PrI development. The percentage of PrIs was significantly higher in the LMN than in the UMN group. Information presented in this review is limited by its retrospective nature and small sample size and additional studies are needed.

Recent Publications

1. Catania, Quyen Nguyen et al "Activity-Based Restorative Therapy and Skin Tears in Patients with Spinal Cord Injury." *Advances in skin & wound care* vol. 31,8 (2018): 371-373. Doi: 10.1097/01.ASW.0000534700.57785.84

Biography

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