Spinal Cord Injury Medicine: Optimal participation in life after spinal cord injury: physical, psychosocial, and economic reintegration into the environment

Abstract: This learner-directed module on spinal cord injury (SCI) presents a variety of perspectives of the process of personal and environmental adaptation for reintegration. Adaptation is unique to each person and does not predictably follow stages. Models used for understanding the process include biopsychosocial, ICIDH-2 (International Classification of Functioning, Disability and Health), and sector divisions of the environment. Home modification requires home (intermediate environment) evaluation and sociospatial behavioral mapping for planning and appropriation of remodeling in proportion to functional need and use. Options for access to the natural environment include specialized wheelchairs, climbing rigging, kayaks, and sail boats. Sports participation with adaptations is expanding and includes a larger variety of organizations and leagues. Economic needs are effectively anticipated with development of a life care plan. Procreative options to overcome infertility after SCI include vibratory stimulation for ejaculation, intravaginal insemination, intrauterine insemination, in vitro fertilization, and intracytoplasmic sperm injection. Approaches to screening, pain evaluation, and assistance in accomplishment of person centered goals. Overall, community reintegration after SCI is continually improving because of better acceptance, accessibility, and technology for building adaptations.

Overall Article Objectives: (a) To review models and theories of medical intervention and disablement and (b) to demonstrate their application in rehabilitation practice by designing unique treatment plans that meet patient person-centered goals.

Key Words: Architectural accessibility; Architecture; Patient compliance; Rehabilitation; Spinal cord injuries; Suicide, assisted.

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