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Psychosocial Consequences of Spinal Cord Injury Worsened with Concomitant Brain Injury**David R. Gater***University of Miami, USA*

Statement of the Problem: In addition to motor paralysis and sensory loss, traumatic spinal cord injuries (SCI) typically have a long list of comorbidities including respiratory dysfunction, cardiovascular dysfunction, cardiometabolic dysfunction, neuropathic pain, spasticity, neurogenic bladder, neurogenic bowel, sexual dysfunction, osteoporosis, and pressure injuries, that contribute to psychosocial dysfunction. For those with concomitant brain injury (BI), the initial rehabilitation and subsequent reintegration into society is especially challenging.

Methods: This presentation will review the comorbidities associated with SCI and discuss the psychosocial consequences of SCI on relationships and role changes, vocation, finances, community reintegration, mood / coping, adaptive and maladaptive behaviors. Additionally, the influence of concomitant BI on these parameters will be discussed, and management strategies to optimize functional recovery will be provided.

Conclusion and Significance: Persons with SCI have a number of physical comorbidities as well as the grief and psychosocial issues associated with their catastrophic injury. When managing concomitant SCI and BI, multidisciplinary teams can optimize rehabilitation strategies as well as community reintegration.

Biography

Dr. Gater is a tenured Professor and Chair of Physical Medicine & Rehabilitation (PM&R) at the University of Miami Miller School of Medicine in Miami, FL, USA. He obtained a BS in General Biology (1982), MS in Exercise and Sports Sciences (1985), PhD in Physiology (1990), and MD (1992) from the University of Arizona in Tucson, Arizona, USA. Dr. Gater completed an Internal Medicine internship at the U of Arizona and Affiliated Hospitals (1993), and PM&R residency training (1996) at the UC Davis Medical Center in Sacramento, California. He has board-certifications in PM&R, Electrodiagnostic Medicine, and the subspecialty of Spinal Cord Injury (SCI) Medicine and has >25 years' experience working with multidisciplinary teams that manage patients with SCI, Brain Injury, or both.