The Role of Nursing Staff in Spinal Cord Injured Patients

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Introduction

Spinal Cord Injuries (SCIs) are a significant cause of disability, with profound and in many cases devastating consequences. Most SCIs result from direct trauma to the vertebral column, affecting the spinal cord's ability to send and receive messages to and from the brain. The disruption impairs the systems that control sensory, motor, and autonomic functions below the injury level.

Nursing patients with SCI is a challenging role both physically and emotionally. Nurses who choose to work in this field must be dedicated and passionate about the holistic care they provide to these often highly physically dependent individuals. Consequently, knowledge of care needs and outcomes is so very important as the nurses are helping this person to begin the rest of his/her life with a body that now works differently. The goal should be to help that person, and his family, have hope for tomorrow and to realize that they can still live a full, independent, productive life, within the limits of their disability. There are very limited centers in our country that provide specialized courses, certification or post-graduation in Spine nursing care. The government should encourage and start the same in coordination with private spine institutions where nurses can get enough exposure and experience dealing with spine patients.

Nurses working in SCI care need experience and knowledge around a range of rehabilitative interventions which will include bladder, bowel, and skin management; management of spasticity and autonomic dysreflexia; sexuality and fertility; and psychosocial issues and patient education for self-care and management [1]. Patients in these situations are often emotionally traumatized and vulnerable; aggression and challenging behavior is not uncommon. Ways of supporting nurses may include team debriefs and clinical supervision [2].

Despite the challenges, many nurses find that working with patients with SCI is immensely rewarding. The setting provides long-term contact with patients and their families who together undergo a significant journey from the acute stage of often-traumatic injury, through to discharge home to commence a new life. Nurses should be aware of the valuable contribution they make to the acute care and rehabilitation of these patients and their successful reintegration back into their community setting. The contribution of nurses to long-term quality of life cannot be overestimated, particularly in the area of continence management.

Communication and collaboration is crucial for successful acute care and rehabilitation of the patient with SCI. Nurses add value to the rehabilitation process by helping and encouraging the patient to transfer the skills learned in therapy sessions to their daily routine, in addition to the unique nursing contributions around continence and skin management. Equally important is the feedback that nursing staff members provide to the multidisciplinary team regarding the patient's ability to carry over these skills during evening and night hours. Nurses often have interactions with family members that are of great value to other team members, allowing all members to adjust their treatment goals and strategies as necessary [1]. The continuing contact between the nurse and patient allows the nurse to provide emotional and psychological support to individuals at their most vulnerable moments.

The nurse's role is important in supporting the patient by explaining what is happening, in terminology that is easy to understand. Obtaining informed consent from the patient prior to any intervention is essential in gaining the confidence of the patient. Nurses assess the readiness of the patient for learning, including cognitive ability, particularly in the presence of concomitant TBI. Verbal information should be reinforced with supplementary materials such as leaflets, diagrams, or online resources, as appropriate to the individuals needs. Particularly in individuals with high level SCI, when offering reassurance by touch, the nurse must remember to touch a part of the body that has sensation—for example, the shoulder or upper arm.

Facilitating the patients' communication with the nurse is important. The patients' ability to summon assistance may be impaired after SCI. A suitable and appropriate method of calling for assistance when required is essential for each patient dependent on their level of altered function. The patients' communication may be inhibited by the inability to use gesture in their usual way; they may be unable to use their hands/arms when they are talking.

The patient's engagement with the environment is likely to be limited in the acute phase of injury. The nurse should be aware that when lying at in bed, the patient has a very restricted view of what is happening around them and this can be very distressing and disorientating. The use of over-bed mirrors can assist with this as can the nurse's verbal description of the environment to the patient.

Patients must be fully involved in all decisions about their care—whether this is the planning of care while in hospital, the care package being provided in the community, or the range of products being offered to them.

This group of patients is very vulnerable both in the hospital setting and in the wider community. Vulnerability in this context includes a number of potential risks. In the acute phase, this might include the risk of medical deterioration, fear, and emotional exposure. In the longer term, they may be susceptible to physical or mental abuse. The nurse must be alert to potential risks in relation to each individual.
Conclusion

Nursing of individuals who have sustained SCI is a specialist skill. Care for individuals with SCI is always patient-centered. Nursing staffs have a key role within the multidisciplinary team. Effective communication between the nurse, the patient, their family, and the multidisciplinary team, is crucial. Nurses must be alert to the potential vulnerability of patients with SCI.

Realizing the need for creating awareness about prevention of SCI and the fact that spinal injury can lead to a fully inclusive life if managed appropriately, International Spinal Cord Society has decided to launch an international campaign to observe 5th September as a SCI Day [3].

References