

재활정책

게시일시 및 장소 : 10 월 19 일(토) 08:30-12:30 Room G(3F)

질의응답 일시 및 장소 : 10 월 19 일(토) 11:00-11:30 Room G(3F)

P 3-43

Comparing participation between brain and spinal cord injury in community-dwelling severe disability

Seo Yeon Yoon^{1*}, Tae Hwan Cho¹, Ja-ho Leigh^{2,3†}

Bundang Jesaeng General Hospital, Department of Rehabilitation Medicine¹, Seoul National University Hospital, Department of Rehabilitation Medicine², Incheon Workers' Compensation Hospital, Department of Rehabilitation Medicine³

Objective

Central nervous system (CNS) injuries which include stroke, traumatic brain injury and spinal cord injury (SCI) constitute a major cause of morbidity and mortality. Morbidity associated with severe CNS injuries may result in long-term disability and burden families and society. Most previous studies have focused on the medical problems and treatment for CNS injuries, and measures of activity and participation in chronic community-dwelling CNS injured people with various origins relatively remain underdeveloped. In this study, we wanted to evaluate differences in the pattern of disability in people with severe CNS injuries from different causes. The objective of this study was to compare activity and participation of community-dwelling people with severe disability from different origins including brain injury and SCI, and to find out risk factors related with disability.

Methods

Data were collected by the questionnaire survey of home-dwelling people with severe disability from 65 health care center involved in community-based rehabilitation program. Demographic profile and socioeconomic factors were asked, and registered grade of disability in one and two were categorized to severe disability. To measure the physical impairment and participation, WHODAS 2.0 (World Health Organization Disability Assessment Schedule 2.0) were also surveyed. WHODAS was recommended by World Health Organization in 2001 for evaluating the activities of daily living of people with chronic disabilities. We compared domain and summary scores of WHODAS between the two groups, and regression analysis was performed to find out risk factors associated with disability. $P < 0.05$ was considered statistically significant. The statistical software SAS System for Windows, version 9.4 (SAS Institute Inc, Cary, NC) was used to perform the statistical analyses.

Results

In total, survey of 505 community-dwelling people with severe disability (322: brain origin, 183: SCI origin) were used for analysis. Domain scores of cognition and relationships were significantly higher in the people with brain injury, whereas score of mobility was higher in the people with SCI ($P < 0.05$). Subgroup analysis according to age groups and onset duration were also performed, and regression analysis revealed that onset duration was negatively correlated with cognition, relationship, participation, and summary scores only in people with brain injury, but not in SCI.

Conclusions

Mobility was more impaired in people with severe disability from SCI origin, whereas cognition and relationship were more impaired in those from brain injury. Onset duration was negatively related with cognition, mobility, relationship, and summary scores in brain injury, but not in SCI. Future studies with more detailed factors including education level and cognitive function and long term follow up period would be warranted.