Introduction
Spinal Cord Injury has far reaching consequences. There are many adjustments to adapt to life after injury, both physically and psychologically.
Following admission to Edenhall, it can be difficult to take in the reality of your situation. There may still be uncertainty regarding your condition and your thinking may be clouded by medication or stress.
Your medical consultant will discuss your case with you and your family. Some people find it is helpful to understand their injury in detail and learn how it will impact on their future. For others, this can seem overwhelming. You can guide the staff as to how much information you and your family want.

Early Stages
People experience a wide range of emotions after their injury. It is normal for both you and your family to be distressed and upset.
Our initial emotional reaction is often influenced by:
- What we were like before the injury
- Poor Sleep
- Medication
- Head injury (if applicable)
- Alcohol or drug withdrawal (if applicable)
- Being on bed rest (boredom)
With time, people begin to understand their situation and emotions tends to settle. At this point, thoughts often turn towards rehabilitation and regaining independence.

Rehabilitation
It is likely that you will get used to the staff and procedures in Edenhall during the few weeks that you are there.
Once you are medically well, we will move you to our rehabilitation ward – Philipshill. While this is a positive step, it will be something new and as such, some may find this change stressful. Staff from both wards will meet with you to discuss this transition and answer any questions you may have.

After spending time on bed rest, people tend to look forward to ‘getting up’. This often means a slow transition period from being in bed, to brief periods in a wheelchair. People often notice a lift in their spirits at this point as their thinking begins to focus on rehabilitation and increasing independence. For others, it can bring greater insight into the challenges that lie ahead.

During rehabilitation, people tend to focus on making physical improvements. Some may ignore the psychological stresses that they are under. In the short term, this can let people feel a little more in control. However, if you should experience difficulties with anxiety, begin to avoid situations, or develop feelings of depression, guilt, or hopelessness, then there are benefits to discussing these feelings.

**Clinical Psychologists**

Clinical Psychologists tend to see people who are finding life more challenging than normal. The psychologist will meet you for a brief interview while you are on the Edenhall ward. This is mainly to find out how you are coping and if you have any concerns.

As your rehabilitation progresses, many people find it is helpful to reflect on their emotions. While some people may have mild changes in their emotions, others can experience more significant difficulties. The type and frequency of psychology input will vary according to what you see as being helpful.

Please note: all discussions with the clinical psychologist are confidential.

**Long Term Outcome**

How someone copes in the longer term does not depend on their injury. Some people assume that a more debilitating injury
is somehow worse. Research suggests that this is not the case. The most influential factors tend to be:

- How someone perceives their situation
- Belief that they can cope and influence their situation
- Social Support
- Meaningful activity (e.g. hobbies)

People continue to adapt to their new situation over the course of their rehabilitation and in the years that follow. Some will adjust with ease while for others, it may be tougher and they may benefit from additional support. You can access ongoing psychological support via your GP after you have been discharged.

Relatives

While spinal injury impacts you, your relatives tend to experience a very similar emotional reaction. They will have many of the same worries and fears that you have. Discussing these worries with each other can be reassuring and help you feel more secure.

The clinical psychologist also provides emotional support and information to your relatives. They can make appointments for one-to-one sessions or family meetings.

The psychologist also runs monthly meetings to introduce new families to the unit and explain the rehabilitation process.

Contact Details

If you or your relatives would like to discuss anything with the clinical psychologist, please contact.

Dr Campbell Culley, Clinical Psychologist

- Telephone: 0141 201 2547
- E-mail: campbellculley@nhs.net

The clinical psychology office is opposite the hydrotherapy pool. Please knock on the door if you have any concerns at any stage in your rehabilitation.
My wife had an accident 12 years ago which left her fully dependent as she had a complete C5/6 injury. My first reaction was sheer panic and every time I visited my wife it broke my heart to see her lying in a hospital bed. Before her accident she was always on the go and had a well paid job that she loved. We have three boys and one of them, aged 16 at the time, took a very long time to accept the change that the accident had made to his mum; seeing her in a wheelchair. The medical staff in the Spinal Unit could not have been more helpful; they were honest with us and kept us informed at all times also encouraging family and friends to assist with my wife’s care where appropriate. We began to become more confident in my wife’s care and needs during her time in hospital. I found it really difficult to face my wife every day especially when she was at her lowest and I knew there was nothing I could say or do to help her. She worked through her rehabilitation and as she progressed daily her spirit lifted a little at a time.

It was not until my wife left hospital that some normality started to return to our lives. Our house had to be adapted and through Motability we leased a wheelchair accessible van. At this point it was essential to find out what benefits my wife would be entitled to help her with her daily life. She now employs her own Personal Assistant’s (PA) to help her live her life more independently.
Looking back I cannot believe what she and indeed our family have achieved since her accident. We now have three grandchildren and two small dogs which keep my wife, her PA’s, and myself very busy. She is always out and about and at times I cannot find her! We have even been on holiday, several times now abroad, something I thought we would never do.

I am not saying that life is easy and obviously there will be times when things seem worse than others, but there is life after the Spinal Unit and we will just take each day as it comes. I am a very private person and find it difficult to put into words how I felt at the time; I am writing this in the hope that our experience may help others.
Planning ahead makes a huge difference when living with a spinal injury as it will make your day much easier. Simple tasks like leaving out clothes the night before can save time in the morning. Leave clothes out within reach of where you are going to be changing and make sure that you have left everything that you require, including footwear.

If you are going to travel by public transport it might be necessary to give notice to the provider beforehand and give as much notice as possible of your arrangements.

If you plan on going out for a day, make sure that you have enough medication with you, if you take any, and make sure there is facilities that will allow you to deal with toileting. If you use intermittent catheters, it will not do any harm to add another few in a bag just in case you get stuck somewhere. If you are travelling by car either on your own or with someone it would be useful to have a way of dealing with bladder issues such as spare catheters, leg bags and even overnight bags, as you never know if you are going to be stuck in the car due to unforeseen circumstances such as floods or snow and you are not able to return home. At least if you have some way of emptying your bladder you are limiting the risks and there should hopefully not be any accidents.
Spasms
I had problems with spasms in the early days of my injury but now they are well controlled on medication. My spasms do however get worse if I have a problem such as a Urinary Tract Infection (UTI) so they are helpful in letting me know that something is wrong.

Bowels
It took me a long time to get a bowel routine established while I was in hospital. It was one of the most difficult things about my rehab but once established I have had very few problems since.

Bladder
While in hospital and for a year after, I used intermittent catheterization. It was difficult to begin with to manage to catheterize from my chair but with practice I managed. After a year and in discussion with medical staff I opted for a suprapubic catheter which I find much easier to manage.

Skin
I have been very lucky and have had no skin problems either in hospital or since discharge but I am aware of the problems that may occur and take care of my skin in order to avoid them.
Neurogenic Pain

Having neurogenic pain has been the hardest thing for me to deal with in the long term. My pain did not start until about three months after my injury but then continued to get worse leading to increased medication to try to control it. Some days are better than others for no reason. It does not seem to follow any particular pattern. I find distraction is the best therapy and in particular exercise. The good news is that there is a lot of research being done in various different centres so hopefully there will eventually be a way of controlling the pain.

Staying Fit And Well

I have a hand bike and it is by far the best purchase I have made since having my spinal injury. I used to run prior to my injury. I still go out with the friends that I ran with previously only now on my handbike. I also go to races with them. I try to get out at least three times a week it makes such a difference to how I feel, just getting out in the fresh air and exercising.

Holidays

I was a bit nervous of flying for the first time so I did it with some friends along for support. Since then I have taken numerous flights on my own and always found the staff at the airports to be more than helpful.