

Ageing with a spinal cord injury

This fact sheet provides information on how your body changes with age. You may find it useful in preparing yourself for getting older and it may give you some ideas to help maintain your independence. The key to maintaining your independence is realising everyone needs help as they age. Identifying and seeking out this help early will play a large part in keeping you healthy and independent for longer.

Everyone is living longer. It is a well-known fact and it makes sense to prepare for getting older. It is important that you know about the “normal” processes of getting older and the processes that are more specific to those with a spinal cord injury. It is possible for ageing to start earlier for a person with a spinal cord injury. The length of time since injury is a major contributing factor.

Even if you have been living with a spinal cord injury for many years, and feel you have adjusted well to your injury, ageing may trigger some new emotional challenges. As your body changes with ageing, you may find that some aspects of your lifestyle, well-established routines and the way you manage life with a spinal cord injury may need to change, too. This can be disruptive, untimely and challenging to your established independence.

Under these circumstances, an individual can feel they have lost control and may feel vulnerable. In short, it is like experiencing a second wave of adjusting to living with a spinal cord injury, but in the context of normal and natural ageing. Here are some important and common considerations for ageing:

Your cardiovascular health

Heart disease, both in the general population and those with a spinal cord injury, is a common issue as we age. Following these guidelines now will help you remain healthy as you age:

- Manage your weight
- Eat well
- Keep moving; increasing the level of activity in your day
- Visit your spinal consultant or GP regularly as they can discuss the prevention of heart disease in more detail and advise you on the right medications to take to maximise your cardiovascular health

Your bladder

As you age your bladder tone may change, and gradually the lining will become thinner. If bladder tone increases, the kidneys may have to make urine against higher bladder pressures. The bladder may also not empty as well as it used to. This means you are at an increased risk of developing urinary tract infections (UTIs) and kidney failure. Refer to the “Your Bladder” fact sheet in this series for more information on UTIs.

There can also be an increased occurrence of bladder leakage. Management of a leaking bladder is best discussed with your spinal consultant or a continence adviser. It is worth considering the bladder





management techniques you will use as you age. For example, it may become increasingly difficult to manage your intermittent catheters. Discuss any concerns you may have with your GP, spinal consultant or a continence adviser.

It is very important you have regular checkups of your bladder and kidneys. This is important for early detection of problems such as bladder cancer, prostate issues and kidney stones. Your spinal consultant will advise on where you can get these checkups.

Your bowel

As you age, your bowels can become sluggish, slowing the passage of food through the gut, and slowing down your bowel action. This can lead to constipation. Refer to the “Your Bowel” fact sheet in this series for further information.

As you get older, you may develop haemorrhoids around your anus. If these become swollen, inflamed, painful or bleed, be sure to talk to your GP or spinal consultant about suitable treatments.

Also, the risk of bowel cancer increases for everyone as they age. Your GP can initiate bowel cancer screening from the age of 50 or if you experience symptoms of bowel cancer at an earlier age. Such symptoms can include bleeding from the rectum, abdominal pain, a change in your toileting habits or an unexplained tiredness. These symptoms may be more difficult for someone with a spinal cord injury to pick up, so routine screening with your GP or spinal consultant is important.

Your skin

Your skin is a living organ and with age it will become thinner. In addition, your circulation will reduce making your skin less elastic. These factors make the skin more at risk of breaking down as you age. Keeping your skin healthy and preventing pressure ulcers is an ongoing process. Remember and practice habits that will help you prevent pressure ulcers from occurring:

- Maintain a healthy skin routine with good hygiene and care
- Check your skin twice a day
- Maintain an ideal bodyweight
- Relieve pressure regularly
- Maintain an adequate diet and fluid intake

Please refer to the “Your Skin” fact sheet in this series for information on keeping your skin in optimal condition.

Wear and tear on your body

People using a manual wheelchair and those who

transfer independently are at increased risk of over-use injuries to the shoulder, wrist and elbow joints. If you are beginning to get shoulder pain, now is the time to explore alternative ways to transfer and mobilise.

The shoulder joint was not designed to be used as the primary joint to carry out most daily activities such as wheelchair propulsion, transfers and sports. The natural ageing progression, amount of time since your spinal cord injury and wear-and-tear of your joints (especially the shoulder and wrist joints) can reduce your ability to transfer and self-propel your wheelchair. The wear-and-tear on your joints as you age may impact on the way you have always carried out your daily tasks. If you are noticing problems with how you carry out daily tasks ask for advice now, don't put up with pain or discomfort.

Some tips to help reduce wear-and-tear on your upper limb joints:

- If you self-propel, make sure the wheels on your chair are positioned correctly (that is, in line with your shoulders) so that you are not placing your joints in a compromising position. An occupational therapist or physiotherapist can assess your techniques and advise on the best wheel position for you.
- Ensure you are using the correct pushing technique. Again, an occupational therapist or physiotherapist can advise you on the correct technique.
- Avoid lifting on your wheels to complete pressure lifts. It is more effective, and less arduous on your joints, to lean sideways or forward on your knees and hold that position for two minutes every 20-30 minutes to complete pressure relief.
- Maintain a healthy weight.
- Consider how and when you transfer. Is there any way to adapt these so less strain is put on your shoulder and wrist? Will using a transfer board help? Is there a way to reduce the number of transfers you complete each day?
- Wear good quality gloves. As well as protecting your skin, gloves help prevent hand abrasions and joint deterioration by absorbing some of the pressure while pushing.
- Consider the use of power-assisted wheels or a power wheelchair to make community propulsion more effective and efficient.
- Consider using a lightweight wheelchair.
- Consider changing the method of putting your wheelchair in your vehicle. Consider a roof-top hoist if you have a folding wheelchair or a drive in vehicle.
- Consider the amount of support on your shoulders overnight – avoid sleeping on your shoulders.

- Consider the use of a shower commode chair to minimise transfers throughout the day. You may need the help of an occupational therapist to plan bathroom modifications if you are unable to use a shower commode in your current bathroom.
- Complete gentle, daily stretches and range of movement exercise to all your joints.

IT IS IMPORTANT TO MAKE CHANGES EARLY BEFORE DAMAGE OCCURS.

Your respiratory health

When you age, your lung capacity generally decreases, and as your general strength deteriorates, your ability to cough deeply can sometimes reduce.

Some tips to maintain good respiratory health as you age are:

- Stop smoking
- Get a flu shot yearly
- Exercise and keep your weight down
- Take deep breaths to keep the chest expanded
- If you experience sleep apnoea, treat it by seeing your GP or spinal consultant for treatment options

A part of ageing is developing a plan for the future. It is not uncommon for people with a spinal cord injury to delay asking for help in order to try and maintain their independence for as long as possible. However, asking for help early can mean you have the opportunity to consider your options and make informed decisions about the future. This is true for accessing in-home supports, managing finances and also plans for future treatment.

A way you can protect your future is by making an “Advance Care Directive” or appointing someone you trust who can act on your behalf if you ever lose the capacity to make decisions, such as an Enduring Power of Attorney or Enduring Guardian. You may consider establishing this for other members of your family too. Such mechanisms are in place for all Australians young and old, as illness or injury can often be unexpected.

An Advance Care Directive is also referred to as a “living will” or an “advance care plan” and is a written statement outlining your wishes for care and treatment in the future should you be unable to express your wishes because of illness or injury. Otherwise it may be difficult for your family or an enduring guardian to make decisions for you, if the time comes.

An Enduring Power of Attorney (EPOA) is someone you

choose to manage your financial affairs if you lose the capacity to be able to manage these independently.

An Enduring Guardian is someone you choose to make personal decisions should you lose the capacity to make these independently. Such decisions may include where you live and what medical treatment or services you should receive.

Refer to the resources listed below for further information on Advanced Care Directives, Enduring Power of Attorney and Enduring Guardians.

Remember: The process of ageing is a natural one. The key to maintaining a healthy and independent life is to accept that everybody, at some stage, will need to ask for help. The sooner you get support with ageing, the better the result. It will enable you to maintain your independence for as long as possible.

References and Further Resources

ParaQuad NSW: www.paraquad.org.au
(02) 8741 5600

ParaQuad’s Community Support and Wellbeing Service
(02) 8741 5674

BrightSky Australia for product and clinical services
www.brightsky.com.au 1300 886 601

SCIA UK Advice on Ageing Well with SCI fact sheets
www.spinal.co.uk/page/Ageing-with-SCI

Occupational Therapist Intervention – Rural Spinal Cord Injury Project. www.aci.health.nsw.gov.au/__data/assets/pdf_file/0004/155191/occupational_therapy.pdf

University of Washington School of Medicine: Healthy Aging after Spinal Cord Injury <http://sci.washington.edu/info/forums/reports/aging.asp>

Spinal Cord Injury Information Network: A closer look at aging www.spinalcord.uab.edu/show.asp?durki=26973

Bowel cancer www.health.gov.au/internet/screening/publishing.nsf/Content/bw-facts

NSW State Spinal Cord Injury Service Directory of Information and Support www.aci.health.nsw.gov.au/__data/assets/pdf_file/0004/155227/sci_directoryweb.pdf

Benevolent Society of NSW – Speaking for Myself www.bensoc.org.au/director/resources.cfm

Ageing Disability and Home Care – Planning Ahead Kit www.adhc.nsw.gov.au/individuals/ageing_well/planning_for_the_future