Keywords: Deltoid paralysis, herpes zoster infection, axillary nerve neuropathy, shoulder subluxation

P27

Demographic profile of patients with traumatic spinal cord injury admitted in tertiary care rehabilitation centre

Zonunsanga C, Chanu Asem Rangita, Hmingthanmawii, Pertin Minggam, Singh N Romi

Objective: To identify the demographic profile of patients with spinal cord injury(SCI) admitted in tertiary care rehabilitation centre

Study design: Retrospective descriptive study

Study duration: 1/10/11 to 30/09/12

Setting: PMR Department, RIMS, Imphal

Methods: Profiles of patients with traumatic SCI admitted in PMR ward RIMS were recorded using a structured proforma and analysed

Results: Among all 22 patients, 95.5% are male. The mean age is 40.41 ±15.1 years. Mean duration between date of injury and admission is 46.77±32.66 and median is 34.50(9-132) days. Mean duration of hospital stay is 44.82±61.63 and median is 20.50 (5-258) days. 72.7% are tetraplegics, C5 (59.09 %) is the most common neurological level. Fall from height is most common (50%) mechanism of injury, 36.4 % are RTA and 13.3% are direct hit on spine.63.6% of patients develop pressure sore and sacrum (78.57%) is the most common site. 27.3% of patients were treated with surgical operation before admission. 63.6 % had UTI.72.7% of patients had varying degree of spasticity. 54.5 % are ASIA grade A. 71.50 is the mean FIM score. Only 22.7 % underwent urodynamic study and all had hyperactive detrusor.

Conclusion: Majority of patients were male tetraplegics with fall from height as most common cause. More than half of patients had pressure sore and spasticity. Complete injury is commoner.

Keywords: spinal cord injuries, pressure sore, ASIA grade, spasticity, FIM score

P28

Organisms isolated from urine samples of traumatic spinal cord injury inpatients in a tertiary hospital and their antibiogram: a retrospective study

Chanu Asem Rangita, Zonunsanga C, Hmingthanmawii, Pertin Minggam, Singh N Romi

Objectives: To determine the antibiotic sensitivity of urine amongst traumatic spinal cord injury inpatients during admission in a tertiary hospital at Imphal

Study Design: A Retrospective Descriptive Study

Setting: Department of Physical Medicine and Rehabilitation, RIMS, Imphal

Study Duration: 1st January 2012 to 31st October 2012

Materials and Methods: All the traumatic spinal cord injury inpatients whose urine were sent for urine culture and sensitivity during admission were included in the study. There were a total of fifteen such patients. Urine culture revealing a bacterial colony count of 10^5 colony forming units (cfu)/ml was taken as significant bacteriuria.

Results: Of all 15 patients, 13(86.7%) patients had significant bacteriuria showing only Gram negative bacteria and 2(13.3%) patients had sterile urine. All the positive urine samples showed growth of only single bacteria except in 1(6.7%) patient. The most common organism isolated was E. coli which was found in 8(53.3%) urine samples. This was followed by 1(16.7%) each for Klebsiella, Klebsiella with Pseudomonas, Pseudomonas, Providentia and Enterobacter. All the organisms were sensitive to imipenem and resistant to trimethoprim-sulphamethoxazole.

Conclusion: OnlyGram negative bacteria were isolated from the urine samples of traumatic Spinal Cord Injury inpatients of PMR, RIMS, Imphal with E coli as the most common organism. All the isolates were found to be sensitive to imipenem and again all were resistant to trimethoprim-sulphametoxazole.

Keywords: significant bacteriuria, antibiogram

P29

Prevention of disability in trauma

Singh Nirankar

Nature of trauma and the type of disability which occurs as a direct consequence of it has been changing since the human being has come into existence. The trauma to the spine is one of the most disabling of the trauma disease.

The incidence and the type of primary disability is often a reflection of contemporary life style of the society. For thousands of years, the simple society of ours, presented a few and simple injuries due to trauma. Now we have enriched our lives through technology and increased the risk to trauma disease thousands times

The endless drive for more and more products, speed, power, comforts and leisure has created more severe problems and disabilities due to trauma disease.

Rehabilitation care includes preventive and therapeutic

The belief that Rehabilitation should commence after the termination of specific treatment, is the basis for classifying rehabilitation at tertiary level of prevention, is regretfully wide spread but obviously is a misconception.

The fact that injury to spine is no exception in getting traumatized in today's scenario of complex trauma, where the consequences of spinal injury are much more grave and disabling to the individual and the health of the nation. Therefore we must make every effort to prevent this disabling trauma disease for the better present and future health of the nation and its citizens.

Trauma rehabilitation aims at preventing trauma disease, there by trying to prevent primary disability there by preventing the secondary disability altogether in the best interest of man kind.

P30

Normal electrodiagonostic study is helpful to diagnose lumbosacral radiculopathy

Kataruka Mohit[1], Pramanik R[2], Halder R N[3]
[1]MD PGT, [2]Assist Prof, [3]Prof & HOD
Dept of PMR, IPGMER, Kolkata

Introduction: In current scenario of physiatric practice, electrodiagonosis is an important tool to establish different types of neurological condition. This is an attempt to look for efficiency of

NCS in management of lumber radiculopathy.

Aims & Objectives: To find out role of NCS in management of lumber radiculopathy.

Study design: Cross sectional observational study.

Study population: Patients attending PM&R OPD, IPGME&R, presents with radicular non-inflammatory low back pain.

Study place: Dept. of PM&R, IPGME&R, Kolkata.

Duration : 6 months (from 1st March, 2012 to 31st August 2012)
Sample size: 16

Inclusion criteria:

1. Patient presents with below knee neuralgic pain after indirect trauma
2. Patient who gives consent
3. Age 18 year
4. Both sex
5. Clinical provisional diagnosis of L5S1 radiculopathy with differential diagnosis of lumber plexopathy and peripheral neuropathy.

Exclusion criteria:

1 Patient with bleeding diathesis
2. Patient who did not give consent
3. Age 18 year
4. Clinically confirmed L5S1 radiculopathy

Methodology: After getting institutional ethical committee clearance, all patients who fulfil the above criteria are included in the study & further diagnostic conformation done by the standard diagnostic criteria of lumber radiculopathy by NCS. Later on the patients with treated with conservartive management for radiculopathy.

Results: At the end of the study, the data were analysed by statistical tools using Statistica version 6 shows that all variables are normally distributed. Mean value of Latency of common peroneal nerve is 4.12 with SD of 0.534, mean value of amplitude of common peroneal nerve is 7.33 with SD of 0.675. SNAP and F wave study are also normal.

Discussion: After proper history taking and clinical examination , it was impossible to conclude with single confirm diagnosis of L5S1 radiculopathy because patient was also complaint of pain around L4, L5, S1 regions. Although after clinical examination we found L5S1 sensory changes without any motor deficit in this group. At the end of the clinical examination it was impossible to differentiate with lower lumber plexopathy L5S1 or peripheral neuropathy of sciatic nerve or its branches. After getting normal electrodiagonostic test value it was possible to exclude the differential of plexopathy and peripheral neuropathy.

Conclusion: Although NCS does not pick an abnormal data in patient with radiculopathy or confirm directly as a case of radiculopathy this special test is specifically helpful to exclude the differential diagnosis of radiculopathy.

P31

Comparison of quality of life of parents of children with disability with those of children without disability

Jain S, Majumdar R, Acharjya M, Gupta V K

Department of PMR, LHMC & Associated Hospitals,New Delhi

Objective: To study the quality of life of parents having children with disability.

To compare their quality of life with parents of children without disability

Material & Method: All the parents of patients attending the PMR OPD in our hospital on follow ups having age group of 3 years and above were taken as case group. The parents of children having no disability were taken as control group from the OPD coming for other reasons like accompanying someone else. The epidemiological data and quality of life of parents were assessed using a pre-structured proforma. For quality of life of parents WHO-QOL Bref scale was used.

Result: Two hundred cases were enrolled in each group in one year of period following Ethical Committee approval. The quality of life was worse in case group as compared to control group grossly as statistical analysis is not completed yet.

Conclusion: We should start the counselling of parents of patients with disabilities and should guide policy makers to start Respite Services for such parents.