

Abstract

Introduction: People with spinal cord injuries (SCI) have unique nutritional needs due to their predisposition to obesity and chronic diseases, bowel and bladder related health concerns, pressure sores and osteoporosis. Currently there are no evidence-based nutrition guidelines provided for this neglected group and with approximately 40,000 people with SCI in the UK, this is a cause for concern.

Aim and Objectives: The overall aim of this project was to: appraise the nutritional advice provided to adults with SCI, living in the UK and to identify limitations with this advice. The specific objectives of this project were: (1) To identify the different types of nutritional advice provided to adults with SCI; (2) To appraise the consistency of this nutritional advice; (3) To appraise the adequacy of this nutritional advice and its relevance to people with SCI; (4) To identify the key limitations with the nutritional advice currently provided, in terms of its consistency, adequacy and relevance; (5) To make recommendations, based on these findings.

Methods: Multiple methods were selected: (1) sources of nutritional advice (n=11) were selected by purposive sampling and compared for 'consistency' using directed content analysis. Sources included: two responses from a cross-sectional questionnaire completed by health care professionals; and nine sources of textual advice provided by organisations or websites in print, html or PDF format. (2) A cross-sectional, web-based survey was provided to people with SCI (n=69) via convenience sampling and enabled their views to be investigated regarding the 'adequacy' and 'relevance' of nutritional advice provided to them. Their responses were analysed using simple frequency counts and basic content analysis.

Results: Comparison of the eleven types of nutritional advice revealed many inconsistencies in the way that advice was provided and in the type of nutrients, foods or health conditions which advice was provided for. Analysis of the web-based survey results revealed: inadequacies regarding the nutritional advice that people with SCI had been provided with in terms of its delivery, timing, form, content and extent to which it was approved by people with SCI; it also showed that secondary health conditions were 'very important' determinants of food choice for people with SCI, thus potentially encouraging them to follow nutritional advice.

Conclusion: Nutritional advice provided to people with SCI in the UK shows great inconsistency. There is also limited evidence to suggest that it is inadequate but relevant for people with SCI to follow. Due to these findings the health of people with SCI is at great risk. An evidence-based appraisal of the literature is required; greater standardisation and co-operation between organisations providing advice; and a need for research -to help protect the health of people with SCI.