

A qualitative assessment of psychosocial aspects that play a role in bladder management after spinal cord injury

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Abstract

Study design

Prospective qualitative study using semi-structured, open-ended interviews.

Objectives

To better understand psychosocial aspects of bladder management after spinal cord injury (SCI).

Setting

People with SCI, recruited through three tertiary care centres in North America.

Methods

Thirty-four community-dwelling individuals with SCI were selected using purposive sampling to ensure men and women with both tetraplegia and paraplegia were represented. The interviews were audio recorded and transcribed. NVivo software was used to code psychosocial domains, medical complications, and methods of bladder management. A qualitative interpretive approach was used, and four participants participated in a debrief session to review the study findings.

Results

The median age was 49 (IQR 40–62) years and 61% (21/34) were male. Most had complete injuries (AIS A, 47%, 16/34), and most had a cervical lesion (56%, 19/34). There was a large range of time living with a SCI (median 20 years, IQR 9–31), and most participants managed their bladder with intermittent catheterisation (67% 23/34). The five most common psychosocial domains were anxiety (often in the context of urinary infections, incontinence, or not being able to catheterise), loss of control (due to irregular bladder behaviour), and embarrassment (from incontinence occurring in public); the domains of confidence and independence/planning included both positive and negative examples of bladder management experiences.

Conclusions

This study demonstrated consistent psychosocial topics related to bladder management in people living with SCI. This information will help counsel people regarding bladder management and identify areas for education and optimisation of bladder function from a psychosocial perspective.

Areas for reflection

- How can we ensure psychosocial factors are accounted for when implementing bladder management following a spinal cord injury?
- Anxiety was identified as one of the most common issues. What steps can you take to help reduce anxiety when teaching ISC?

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