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**INFLUENCING FACTORS FOR HOSPITAL READMISSION IN
PEOPLE WITH SPINAL CORD INJURY: A FIVE YEAR
RETROSPECTIVE STUDY**

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Abstract

Purpose: The study was conducted to find out the influencing factors for hospital readmission in people with spinal cord injury. **Objectives:** The aims of this study were to find out the socio-demography information, the readmission rates within 5 years after discharge from hospital, causes of readmission in patients with spinal cord injury in CRP. **Methodology:** The study design was cross sectional and quantitatively analyzed retrospective data of patients readmitted between July, 2014 and June, 2019; which was collected from the hospital records of Centre for the Rehabilitation of the Paralyzed (CRP) in Bangladesh which is the largest spinal cord injury rehabilitation center in South Asia and by telephone and Data were collected by a standard questionnaire and analyzed using SPSS software version 22.0. **Results:** Data from 1727 files, it is found that 107 (6%) readmitted to CRP in between July, 2014 and June, 2019. Among 96 participants, fifty- three of the readmitted patients had a subsequent second readmission, Twenty one patients had third readmission, 5 patients had 4th and 4 patients were readmitted for 5th times. The first common reason for readmission was further rehabilitation (95%) and the common SHCs for hospital readmission were pressure ulcer (92%), followed by urinary tract infection (12%), chest pain (8%), acute pulmonary insufficiency (6%), unspecified surgical procedure (55%) and for gait rehabilitation (22%) most commonly. Patients with paraplegia (84%) had greater odds in readmission than tetraplegia (16%) and patients with complete paraplegia particularly at NLI T7-T12 had greater odds of hospital readmission than their counterparts. **Conclusion:** From the study it can be concluded that factors related to patient injury profile such as type, completeness and level of injury were responsible for readmission. SHCs were the most common reasons for readmission including, further rehabilitation as well as gait rehabilitation and there is a need for effective programmes for their prevention in the society.

Keywords: Spinal cord injury, readmission, secondary health conditions, further rehabilitation, pressure ulcer, incomplete paraplegia.