

# RH Be Autonomic Aware... Avoid a Scare 🗗 NRH

**National** Rehabilitation Hospital

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## Aim of Study

To provide information on Autonomic Dysreflexia (AD) that both medical /non-medical personnel have the ability to understand. A visual tool has been designed to achieve this ... a picture story.

## Objective

To audit that any medical/non medical personnel will be able to identify;

- Individuals at risk of AD
- Main causes of AD
- Signs and symptoms
- Emergency treatment



## **Material Methods**

- The Framework "Plan Do Study Act" was used throughout the process
- One page visual tool was designed with a focus group
- A simple questionnaire was distributed to (N167) to identify the knowledge level pre/post viewing poster

## **Group Identities**



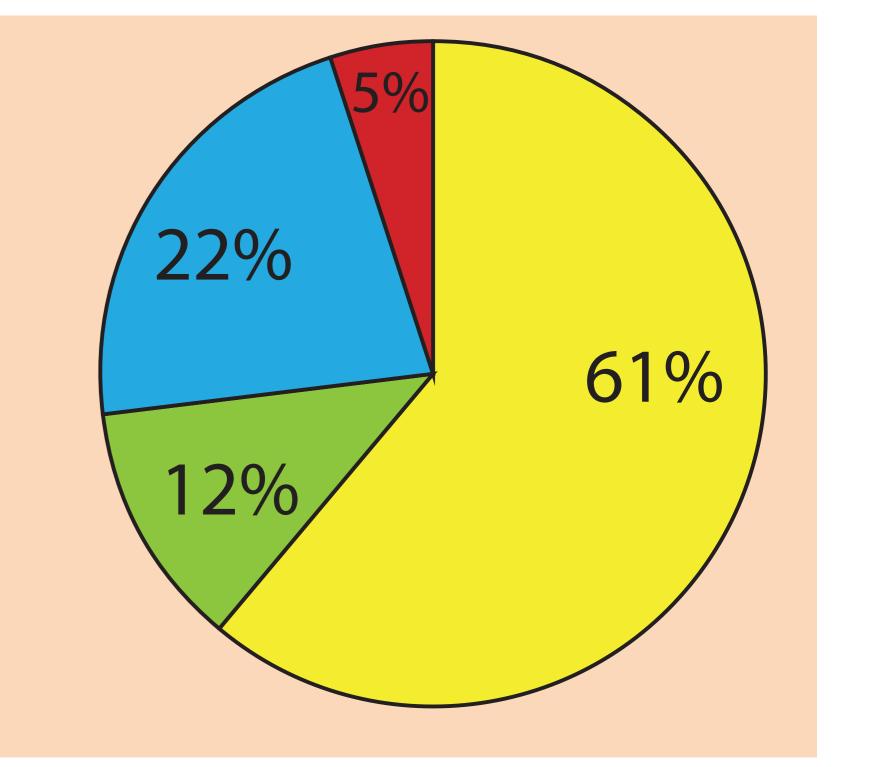






## Questionnaire

- Who can get AD?
- List the most common cause
- List signs & symptoms
- What management is necessary?



### **Comments Received on Audit**

#### Nurse:

- Simple straight forward
- Useful for teaching
- Good for patients and family

#### **Patient:**

- Clear at a glance
- Please can I have a copy
- Can I have it as an app?

#### Non Medical:

- I never thought about people in wheelchairs and their issues
- Does everyone know about this?

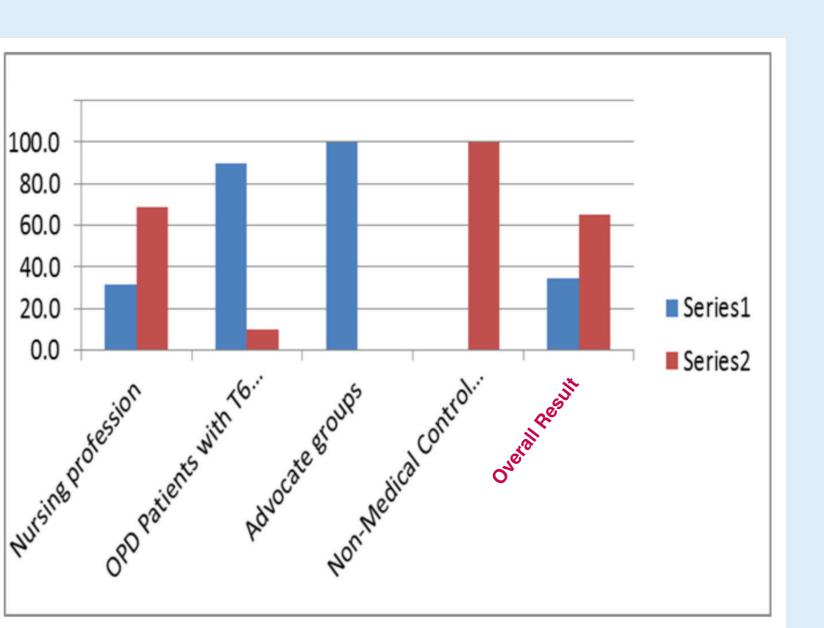
#### **Advocate Group:**

- Where can we get a copy?
- Concise and important

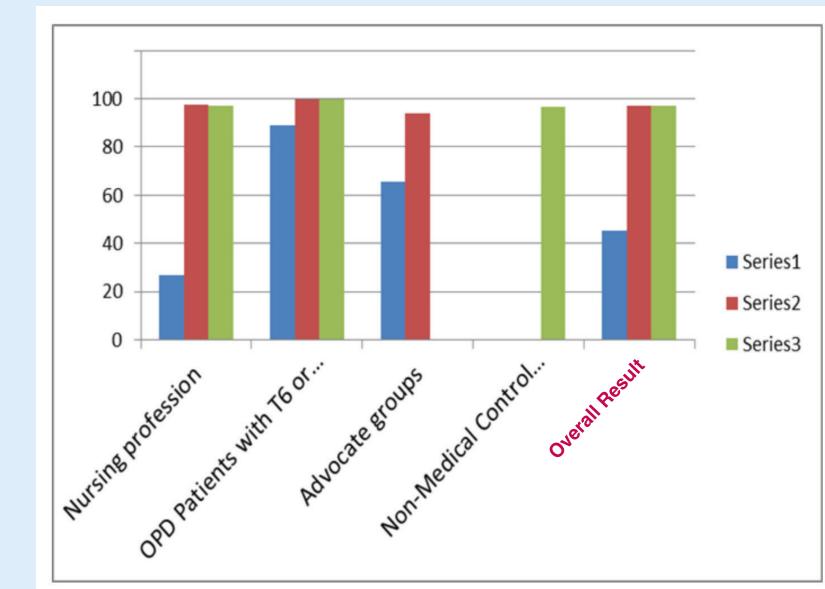
#### CCIrf' THE MYSTERY OF AUTONOMIC DYSREFLEXIA? spinal cord injury. It can present with a variety of signs / symptoms which can vary from mild to severe discomfort. As a SCI individual you need to have a good understanding of AD and be familiar with signs and symptoms and immediate management of this potentially life threatening condition. It must be addressed immediately because if it is untreated it may progress **HOW DO I GET AUTONOMIC DYSREFLEXIA? CAUSES SIGNS & SYMPTOMS** Ingrown toenai 3. Causing high Scrotal compression Sexual stimulation Menstruation and any **Emergency Treatment** for Autonomic Dysreflexia Signs / Symptoms of Autonomic Dysreflexia a full bladder sends all for assistance - Sit upright and lower legs - Loosen any tight clothing / legs straps - Monitor BP until symptoms have resolved Common causes to exclude / treat first are: If symptoms persist and cause is unknown - Take prescribed nedication - Nifedipine 10mg capsule "bite and swallow" method It is essential for you, family members or carers to recognise and understand the potential causes, prevention and treatment of AD. If an If BP not settling and cause not identified episode of AD is identified quickly, and treated immediately the symptoms may then subside, thus removing the likelihood of complications.

## **Results of Audit**

Participants with / without prior knowledge Limited prior knowledge / no prior knowledge



Series 1 = % with prior knowledge Series 2 = % with no prior knowledge



**Series 1** = % Correct responses before viewing poster

**Series 2** = % Correct responses after viewing poster

**Series 3** = Control group % Correct responses after viewing poster

## Conclusion

- •Overall the strength of evidence shows that the poster was equally understood by both medical /non medical personnel demonstrating that all objectives were met **Unexpected outcomes**
- An exceptionally high demand from patients, health care professionals, and external agencies requesting a copy of the AD leaflet
- By request the leaflet has been translated into German, Dutch, Polish and most recently into French for the SCI individuals in Haiti

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Contact your GP or Accident / Emergency Department

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