

The Sibley Report

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...valuable information to make your job and life easier! To suggest topics, please call Angela Veri, National Director of Customer Relations. Sibley & Associates is a national disability management firm with close to fifteen years experience, nearly 300 staff/consultants and advanced technology.

Sibley
& ASSOCIATES INC.

The Spine Revealed

The spine is vital to our functioning. It is the main support for the spinal cord and the nerve pathways that carry information to and from the brain to the arms, legs and rest of the body.

Due to the nature of many motor vehicle accidents, your clients may experience varying degrees of spinal cord injury (SCI). The spinal column is made up of three regions: cervical, thoracic and lumbar.

Cervical Spine:

- Extends from the base of the skull to shoulder level and made up of seven cervical bones or vertebrae.
- Main motion is flexion, extension, bending and turning of the head.
- Contains the cervical nerves that supply movement and feeling to the arms, neck and upper trunk.

Thoracic Spine:

- Attaches to the ribs in the chest region and made up of twelve

vertebrae. The spinal canal in this region is smaller than the cervical or lumbar areas, making it more at risk if there is a fracture.

- Main motion is rotation.
- Contains the thoracic nerves that supply movement and feeling to the trunk and abdomen.

Lumbosacral Spine:

- Extends from the waistline down the lower back to the base of the spine.
- Main motion is bending forward and backward as well as side-to-side.
- Contains the lumbar and sacral nerves that supply movement and feeling to the legs, bladder, bowel and sexual organs.

With each region of the spine responsible for different functions, the type of SCI depends on which region is injured and the severity of the injury. *Please see the attachment for an overview of SCI.*

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Overview of Spinal Cord Injury (SCI)

Complete SCI	<ul style="list-style-type: none"> • Damage to the spinal cord which results in complete and usually permanent loss of function below the level of the injury.
Incomplete SCI	<ul style="list-style-type: none"> • Damage to the spinal cord that is partial; some motor and sensory functions remain so there may be some feeling but little movement, or some movement and little feeling. • Effect on functioning depends on the area of the cord injured. • Degree of loss varies because the amount of damage differs from person to person.
Paralysis due to SCI	<ul style="list-style-type: none"> • Inability to move or feel because of injury or disease to the spinal cord. • Degree of paralysis depends on where the spinal cord is injured and the severity of the injury (e.g., partial or total paralysis of the arms and legs).
	<p>Paraplegia:</p> <ul style="list-style-type: none"> • Impairment or loss of movement or feeling in the thoracic, lumbar or sacral (but not cervical) segments of the spinal cord. • Depending on the level of injury, the trunk, legs, and pelvic organs are affected to varying degrees.
	<p>Tetraplegia (preferred to "quadriplegia")</p> <ul style="list-style-type: none"> • Paralysis of the four limbs due to cervical (neck) injuries. • Injuries above the C-4 level: may require a ventilator or electrical implant for breathing. • C-5 injuries: usually shoulder and bicep control, but no wrist or hand function. • C-6 injuries: usually hand function but no wrist control. • C-7 and T-1: usually the ability to straighten the arms, but possible hands/fingers dexterity problems.