POWER OF PARTNERSHIPS

The Government of Manitoba and our partners have played a leading role in supporting spinal cord injury (SCI) research and best practices in the province by providing critical investments and services. This support has distinguished Canada as a leader in medical research, treatment and care for people living with SCI.

THE NUMBERS

- **140 days** - Median length of hospital stay and rehabilitation for individuals with SCI. Required care is highly specialized and hugely complex.
- **$120 million** - Estimated annual amount that spinal cord injuries cost the Government of Manitoba in health care and support costs. As the population ages and more spinal cord injuries occur from falls, these costs will increase dramatically.
- **1,546 residents** - Estimated number of Manitobans living with traumatic spinal cord injuries, with more than 50 new injuries occurring every year.
TANGIBLE PROGRESS

The Rick Hansen Institute connects scientists, researchers, surgeons and health care practitioners to acquire and translate research findings into practical solutions.

Rick Hansen Institute investments in translational research projects in Manitoba include:

- A nation-wide clinical research and data collection platform, led by RHI, has been implemented in every major Canadian medical facility treating traumatic SCIs. One site is operative in Manitoba at Health Sciences Centre (acute care and rehabilitation) in Winnipeg. To date, 92 Manitoba residents have enrolled.

Researchers and clinicians at the Health Sciences Centre are also contributing to:

  - **Autonomic Dysreflexia and abnormal cardiovascular control following SCI** – to raise awareness of physicians, nurses and paramedics who treat episodes of uncontrolled blood pressure and autonomic dysreflexia (AD) after SCI. This will facilitate the adoption of best practices which could reduce or prevent incidences of full blown AD and decrease emergency room and hospital admissions.

  - **Spinal Cord Injury Rehabilitation Evidence (SCIRE)** – a free online resource of evidence-based rehabilitation recommendations and best practices for clinicians and people living with spinal cord injury. This information also enables relevant decision-making in public policy and practice settings, and guides the research community and funding organizations to strategically focus their time and resources on the gaps in knowledge, and to identify research priorities.

  - **Internet Pressure Ulcer Clinic** – this online Clinic makes it possible for local home care providers to work with medical specialists, via the internet, for wound assessment and treatment information, improving access to medical expertise. Following development in London, ON, the Clinic is being implemented in Winnipeg, Calgary, and Fredericton.

Some projects at the University of Manitoba include:

  - **A new neuroprotective strategy** – to stabilize the spinal cord biochemical environment, early after injury, to minimize progressive cell death. Early restoration of the spinal cord biochemical environment will allow the injured neural cells to survive, aiding the restoration of function.

  - **Treatment of spasticity** – a clinical trial to evaluate the use of nabilone (THC) to reduce spasticity (involuntary muscle spasms) which makes it difficult to sleep and control movements. Spasticity affects approximately 75% of people with SCI.

  - **Role of Assistive Technology** – this study looks at how Assistive Technologies can support young adults with spinal cord injuries, as they participate in daily activities typical of someone their age. i.e. working and going to school, being financially independent and living on their own.

Learn more.
www.rickhanseninstitute.org