

My Spinal Cord Injury

My name is Andy, I was born in 1963, three years before England won the football world cup. I was too young to see the game then and after our recent performance in the 2000 + 2004 European championships, I think it's unlikely I'll see them win it again! Still we can all live in hope and who knows what surprises life will throw at us.



I live in a place called Orwell, which is a small village just outside Cambridge in the United Kingdom. I have two lovely children from a previous marriage, a boy called Gregory, born in '91 and a Girl called Josephine, born in '93. I use to be a Police Officer in the Metropolitan Police Force working all over the London Area. In July 1994 I had just completed over 14 years of service with them. I had been selected for promotion to the rank of Inspector, for which I had studied hard in the previous 2 years to achieve.

I was a very keen sportsman, loving all sports. I was a keen runner and cyclist but my particular passion was for windsurfing. I had taken the sport up when it was pretty much in its infancy in the UK. I had progressed over the years, from continually falling off a beginners board and drinking large amounts of disgusting reservoir water, to jumping waves in force 6-7 winds in the seas off the South Coast of England. The sense of freedom and of being at one totally with the elements is amazing. I remember those days very fondly indeed.

I had everything to live for, and used to think could life get much better than this? Then on a hot summer's day on the 16th of July '94 I had been given the day off work. It was late afternoon. I decided to go for a quick 40 minute hard cycle on my mountain bike, taking in local woodland and parks. I remember thinking how much I was going to enjoy the beers afterwards on my patio in the evening sun. The rest as they say 'is history'

The Accident: I had a relatively low speed fall from my bike with the most horrendous consequences. I broke my neck, shattering three vertebrae very close to where the spine joins the skull. In an instant I went from being fully able bodied to being COMPLETELY paralysed from the neck down fighting for my life. To this day I'm not sure exactly what caused me to fall off my mountain bike. I was travelling uphill at slow speed. It was probably a hole in the ground or an exposed tree root that caused the front wheel of my bike to stop suddenly. I don't remember leaving the bike or hitting the ground.



One minute I was enjoying a summer's afternoon cycling across a local park. The next thing I recall is lying on my side on the grass next to my mountain bike. I could see my arms and legs but couldn't feel or move anywhere below my neck. I had great trouble breathing. It felt like I was trapped under a collapsed rugby scrum or something similar. Surprisingly I felt very little pain but I knew straight away that I had injured myself very badly.

I remember a number of people talking to me but I couldn't answer them as my breathing was extremely difficult. I was totally helpless, fighting desperately to remain conscious. I was physically very fit but now my life depended totally on help from

other people at the scene of my accident. I recall 2 or 3 young boys telling me an ambulance had been called. I saw a woman walking towards me with a few pillows in her hands. I knew from my first aid training in my own job that it was essential that I wasn't moved. She wanted to make me more comfortable, I tried to say 'don't move me' but my breathing made it impossible. Before she could move me one of the young lads told her not to and to wait for the ambulance. I will be eternally grateful for his intervention. Any movement of my head at that stage would have had very serious consequences, making my injury a lot worse and maybe even killing me.

I heard sirens in the distance and soon 2 paramedics were looking after me. I could tell by their faces and their conversation that my injuries were extremely serious. They told me that they were going to see if the 'Air Ambulance' was available to get me quickly to hospital. Fortunately for me it was flying that day and was landing alongside me about half an hour later.

I was soon being treated by an extremely competent Doctor. He injected steroids straight into my neck, to help reduce the swelling. He told me that he thought my neck was broken. With the assistance of the two paramedics he stabilised my neck in a collar. I was then very carefully lifted onto the helicopter's stretcher. In a few minutes we were airborne heading for the Royal London Hospital in Whitechapel, London. The helicopter was met on the roof of the hospital by an emergency trauma team. Soon I was in the highly sophisticated emergency trauma unit. I remember lots of people talking to me but soon afterwards the numerous drugs I had been given had kicked in making me very sleepy. After a lot of x-rays and scans I was taken to a high dependency unit.



The scans and x-rays revealed that I had badly broken 3 bones in my neck. Their medical name is C2, C3 and C4. It wasn't known at this stage how bad the damage was to my spinal cord. I would be facing one of the most severe physical disabilities were it severed completely.

Halo Traction: My neck was stabilised using halo traction, this involved drilling 4 titanium screws through my skin and into my skull. Then about 8 Kilos of weight were hung by a series of pulleys off the head end of my bed. This was to stretch my neck and allow the broken bones room to start healing. I recall seeing family and friends but was drifting in and out of sedation all of the time. After a week at this hospital, it was decided that the best place to treat me would be a specialist spinal injuries unit. The Royal National Orthopaedic Hospital, in Stanmore, Middlesex was chosen. This necessitated the removal of my halo traction and another helicopter transfer



On arrival I was met by a specialist Spinal Consultant and his colleagues. I was put in halo traction again and was looked after by a very competent nursing team. I started getting very breathless and had real scary hallucinations. The next day a more senior consultant decided I would be better suited to a more advanced form of halo traction. So for the third time I had more holes drilled into my skull and another halo fitted. Today I still have 8 scars in my head where all the screws were fitted. Click on the thumbnail to see a detailed diagram showing ['Halo Traction'](#)

Shortly after this I became very weak and unwell, I woke up some 4 days later unable to swallow because of a pipe going down my throat. It was very scary, I could hear things being said about and to me but couldn't communicate in any way. It took me a long time to realise what was going on. Apparently, I had been put on a ventilator

and sedated to give my body more chance to recover. It was two further days before I was taken off that machine.

My SCI Treatment: By this time the Doctor's had decided on my treatment. They ruled out repairing my broken neck bones with metal plates. Mainly due to the complexity of the breaks themselves and the very real risk of making my spinal cord damage worse. They would also have had to use the base of my skull bone as a securing point for the metal work, which effectively would rule out me ever being able to look left or right again without moving my whole body. I was also told that the extent of my spinal cord damage wouldn't be known for at least 4-6 weeks after my injury, because of the swelling and the fact that the 'cord' goes into 'spinal shock' I was told it was unlikely that I would walk again and I would probably remain paralysed from the neck down. Then I was told that I would have to spend the next 6-8 weeks in bed, motionless to allow my neck to heal. The thought of that was horrendous.

I was transferred to the high-dependency ward of the spinal unit. I would get to know the ceiling in this room very well over the next few weeks. I would become very good friends with the man in the bed beside me. His name is 'Ray', he broke his neck the week before me in a motorcycle accident. We would spend a lot of the time talking to each other. Because we were both in skull traction it was going to be 8 weeks before we were both able to put a face to the voice from the bed next door. It seemed an eternity before those weeks passed. They were helped along their way by numerous visits from family and friends.

I had to have 'everything' done for me, I'm not going to detail everything here but let's just say personal dignity was on the back shelf. As the days became weeks I started to regain some sensation back in my legs. I could feel very faintly but movement was still impossible. By now I had a regular routine of physiotherapy in bed and passive exercises.

The hours soon turned into days, the days into weeks and finally some eight weeks since my accident the Doctors were thinking of allowing me to sit up in bed. I couldn't wait! I had some movement and feeling in my right side and was sooo looking forward to seeing something other than that hospital ceiling. I was warned that I may feel unwell. That was an understatement! After just 10 minutes of sitting at 45 degrees I wanted to lay flat again. Apparently the sick feeling and light headedness I was feeling was normal. Over the next few days I gradually managed longer and longer, by now my halo traction was attached to a body brace which I had to wear for a further six weeks. I looked like something out of a science fiction movie.

Up and About: Gradually, as days went by, I was able to last longer than those 10 minutes. Next came the task of getting me from the bed to a wheelchair. The only way of doing this was by using a device called a hoist.

For those of you not familiar with a hoist, basically you have to have a sling placed underneath your body, this is then attached to the hoist. You are carried rather like a baby in a Stork's beak. It takes four to five nurses and a lot of patience to lift a tetraplegic man successfully into a wheelchair. To say this experience is uncomfortable and feels dangerous is a massive understatement. I hated the indignity of it.

Once in my wheelchair for the first time I was given a tour of the spinal unit by one of the nurses. I was amazed at just how different the unit actually was now I was upright

again. It looked totally different than I imagined it when I was lying in my hospital bed. I was now able to see other patients faces properly for the first time. I then realised just how much for granted we all take our surroundings. This was the first time I was able to look out of a window in nearly two months. The colours of the sky and the trees were somehow more vibrant than I remember them. I sat there for several minutes just taking it all in again.

A good friend of mine called Deane, had a horrific motorcycle accident in 1991. He broke his back in several places, and spent a year in hospital and on various spinal units, eventually ending up for several months at Stoke Mandeville. After a lot of hard work and recuperation he managed to leave the unit walking on sticks as an incomplete paraplegic. We were always good friends at work and I used to visit Deane on a regular basis during his recovery. I remember seeing newly injured tetraplegics in the spinal unit he was was on. I remember thinking I couldn't possibly live like that, little did I know I would find myself in that same position just three years later. Deane became a tremendous source of encouragement and motivation to me. He helped me through some really difficult times and when, at times, I was prepared to give up he was the one who made me carry on. He understood more than anyone what I was going through and I will always be grateful for his dedication.

It was really good to be up again. It was nice to be able to have my children sit on my lap and cuddle me. Even though my arms still sat as useless extensions to my body on the armrests of my wheelchair. I desperately wanted to cuddle them back, but couldn't. My emotions were really up and down during this time.

The Spinal Unit: It was great to actually meet a lot of other patients too. I found the general friendship and community spirit on the spinal unit was what made it so good. It was that together with encouragement from friends and family that got me through the bad times and wanting to make the most of any recovery I was going to experience. Although every patient had a different story and a different injury we somehow all shared the life changing experience of a spinal cord injury. We all knew what it was like what not to be able to urinate on your own. We all knew or were going to learn the complications of SCI and the adjustments to normal life that were going to be necessary when we all left hospital.

Beds on spinal units are hard to get, by their very nature these injuries take a long time to treat. Consequently many people are waiting for a place to become free on a spinal unit. On average at the spinal unit I was on their would be one or two new admissions each week. Diving accidents abroad, motorcycle accident's, and sports injuries to name but a few. Now that I was up and about, I always tried to visit new patients and their families trying to give what help and encouragement I could.

Gradually the time I was able to spend in the wheelchair increased until I was able to stay up in the chair the two to three hours at a time. You may wonder why I couldn't spend any longer than that the wheelchair? There are many reasons, perhaps the most important one is that, with any spinal cord injury your feeling and skin sensation will be affected.

Some will feel nothing at all or may have very limited perception of touch or pain. This can lead to the skin becoming damaged, and if left untreated to the further complication of skin pressure sores. These can be life-threatening if they get too bad. That's why every tetraplegic or paraplegic will have to keep a very watchful eye on their pressure points and their skin and do what is called pressure relief every half-hour or so. This is to prevent the skin cells breaking down and dying.

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I was soon attending the spinal unit gymnasium once or twice a day. Here the physiotherapists went through various exercises to strengthen my legs abdomen and arms. A lot of these exercises were passive, as I didn't have the movement to do them myself. It felt to me, that my arms were very weak and a lot weaker than my legs. I asked many nurses, physiotherapists and occupational therapists if it was possible for someone to recover enough movement to walk, yet still not be able to use their arms. They all said yes it was, this didn't seem possible to me. Having lived with spinal cord injury for over ten years I know too well that it is entirely possible.

Frustrating Times: I still had to be pushed from the spinal unit to gymnasium and therapy areas by a member of hospital staff. I found this very frustrating as a lot of the well recovered paraplegics used to fly past me in their wheelchairs. I often wished I had broken my back and not my neck so I had the full use of my upper body. At least then I'll still be held to take part in sport and become entirely independent. Nowadays with the recovery I've had, I've come to terms with being a tetraplegic. Whilst I won't be able to take part in sports that I used to love, there are many things I can do independently or with a little intervention from other people.

At mealtimes I was still being fed by a nurse. Personal hygiene and eating are something else that we all take the granted. All your dignity goes out of the window when someone else has to do those tasks for you. It's frustrating, and somehow you never get the job done the way you would have done it in the past. There was nothing worse than watching your dinner go cold while the nurse who was meant to be feeding you is discussing the latest happenings in 'Neighbours' with her colleague.

As time went on my legs became stronger. One day in the gymnasium my physiotherapist, Sharon decided it was time to see if I could take my weight on my feet. Five or six therapists came over to assist. With their help supporting my weight I was lifted into a standing position. Although my balance was precarious, I was actually standing for a few seconds. Even though I was still supported by six people, it was an absolutely momentous occasion. Friends and family who were there looked smaller than they used to. This was because of the traction applied to my neck through the halo attachment and body brace had made me over an inch taller than I used to be. I was now standing at six feet five inches!

On a spinal unit, every time a patient manages to stand or walk the first time word soon gets around. When I was pushed back to the unit in my wheelchair just about everyone already knew I had stood up. They all offered congratulations, staff and patients alike. This was very humbling because many of the patient's new already they would never walk again, as their injuries were diagnosed as complete. My arms were still very weak and would be a long-time before I recovered any useful function in either of them. As time went by my leg strength still continued to improve. The time I was able to stand up gradually increased as well.

Halo Traction Removal: At about three and a half months after my injury, the time came to remove my halo traction and replace it with a supported collar. I was required to lay flat on the bed whilst one of the house doctors was called to come remove the halo screws from my head and skull. Since this halo traction had been fitted three months ago it had remained in place, with the screws that went through to my skull bone periodically being checked for tightness. This was done with a torque wrench, that was painful but just bearable.

The procedure I was about to undergo now was going to be the most painful

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experience of my life. Several nurses gathered around my bed. I knew this was going hurt, but wasn't prepared for the intensity of the pain. After three months the metal screws were now firmly embedded in my skull they had become joined to skull bone and surrounding muscle and skin. As the doctor released each bolt in turn and unscrewed it, I had feeling of someone twisting a red hot poker deep inside my head. My whole body started shaking from the intensity of the pain, one bolt would have been bad enough, but there are another three to go. At the end of the procedure I was completely drained and screaming in agony, my face was covered with blood. Somehow, it was all worth it. My head felt free of the device that had encaged it the past three months. The nurses fitted my neck with a supported collar, this I would have to wear for the next three months. Although my neck muscles were largely unaffected by my injury, because they had been dormant three months they had also become very weak and wasted.

First Trip Home: On all spinal units and rehabilitation centres preparing patients for a new life in the home environment is very important. At the spinal unit I was on as soon as the nursing staff thought you were fit enough to journey home they would arrange a home visit. For me this came some four months after my injury. I was only used to the confines of the spinal unit and the safety that that had afforded me. My journey home would be in an adapted minibus. I was in my wheelchair which was in turn bolted to the floor of the van. I knew the journey would take about 2 hours. Whilst it was nice to be seeing the outside world again this was proved to be one of the most upsetting experiences since my injury.

The catastrophic nature of my injury became very readily apparent. Once on the motorway I saw the rest of the world was going past its usual frenetic pace. It was then I realised the my life would never be the same again. As I was still wearing the halo traction and brace the journey was also physically uncomfortable, as every jolt of the van radiated through the pins in my skull. As we turned into my road I became very emotional with tears running down my face, the last time I'd been in this road was when I set off on my mountain bike back on that fateful sunny day in July. I was completely overcome as we pulled up outside my house. My ex-wife and my two lovely children were all waiting to see me and very excited to welcome daddy home.

The nurse helped me out of the van on the remote control platform. Because of my size the wheelchair I was in was a big cumbersome one. It was awkward getting it into my house over a couple of steps. After a while, I was again enjoying the confines of my house. It was lovely being out of the hospital environment. We ate a nice lunch and then were soon on way back to hospital. I felt very depressed the most of the journey back, the nurse tried to reassure me that this was only normal, and that any subsequent visit will be a lot easier. When we arrived at the spinal unit in was about 6 PM. I couldn't believe how physically drained and tired I had become. I was soon back in bed exhausted.

Walking Frame: My therapy continued over the next few months and the next major milestone was when I was able to use a walking frame for the first time. This frame had wheels on the front of it. My arms had to be strapped onto the handles so I could move the frame forwards. I wanted to stay upright with this frame for longer than the therapists would allow me to. As the weeks went by I progressed to using the frame for short distances. It took me ages to walk a few steps but ultimately the sense of achievement was more than worth it. My arm function was still very much behind the recovery shown in my legs. My left arm had virtually no function in it. My right arm was showing slight sign of recovery. I still had no hand function to talk of. The occupational therapy team were very dedicated bunch of people. They persisted with

lots of exercises and routines to improve my hand and arm function. By the time I was to leave hospital I was able to hold an adapted pen with my right hand and move my right arm through about 30 percent of its normal function. This still wasn't enough for much practical use, but this continued to improve after I left the hospital.

Patient education: is another priority which is high on the agenda of most spinal unit's. It is essential that everyone with a spinal injury or a person who is going to care for someone with a spinal injury fully understands the nature of the injury and the complications that can go with it. These complications are touched on throughout my story, they are numerous and vary greatly depending on the nature of the actual injury. See [complications](#) and [treatment](#) sections of this site for more information

Breathing is directly affected by muscles controlled through the spinal cord so all tetraplegics will have some degree of breathing compromise. They also include the proper and hygienic treatment and management of bladder and bowels. Skin care and prevention of injury and pressure sores is also very important. A lot of people with spinal cord injury suffer varying degrees of spasm. These can vary from mild shakes and tremors, to spasm's strong enough to throw someone from their bed or wheelchair. These spasms can be controlled by medical intervention and drugs. Sexual function and fertility is also affected to varying degrees with a spinal cord injury.

Because the autonomic nervous system is affected by spinal cord injury patients above the level of T 7 , they can also be affected by a condition called autonomic dysreflexia. This in very basic terms is when the bodies autonomic nervous system reacts to outside stimulation that it can no longer control effectively i.e. an overfull bladder/bowel or injury/pain etc. If left untreated it can result in very high rise in blood pressure and ultimately a stroke and death. I remember being very scared, in fact petrified of this condition when I was educated about it by a nurse.

The doctors treating me and the nursing team regularly met with me and my family to discuss progress, treatment and a possible release date from hospital. At the spinal unit I was on on average a paraplegic would leave hospital after three to six months. A tetraplegic would usually require a longer stay, normally in the region of ten to eighteen months.

My stay turned out to be just short of one-year. Towards the end of my stay in hospital I was coming home at weekends to visit my family and friends. This was an excellent experience to prepare me for my full return home. I left hospital able to walk a few steps on my own using two elbow crutches. As my arms and hands were still very weak most of my personal needs were still taken care of by family, community nurses and care workers.

Hard Times: The months following my release from hospital were very hard indeed. This was my lowest time mentally to date. The grim reality of the consequences of what took a second to do was finally sinking in. The amount of physiotherapy that is available in the community varies a great deal. I managed to get three one-hour appointments each week at the local hospital. The hospital staff said financial and employment constraints meant that was the absolute maximum that anyone would ever get. At this point only one-year post injury, they were still plenty of time for me to gain further recovery. It was a real shock going from at least five to six hours of therapy every day on the spinal unit to only three hours a week. I had an Exercise routine to do at home but looking back I'm sure I would have made much better progress with more input from the local hospital.

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I missed the other people on the spinal unit and motivation and encouragement they offered. In short, I tried to make the best of a bad situation but I found everything very frustrating. As time went by, I realised that was only me that was going to make a difference to my overall recovery. After ten months or so at home, with the help of my doctor, I managed to get a further six-week stay in a neurological rehabilitation unit. This was going to mean a further six weeks away from home. The conditions of this hospital unit were pretty dire, but I was back receiving daily physiotherapy and occupational therapy input. The staff were well motivated and I feel I made excellent further improvement.

My Renal Tumour: Towards the end of this period of rehabilitation my spinal unit required that I underwent a routine bladder and kidney scan. I went to yet another hospital for this scan.

These scans detected that my right kidney was unusually large. The urinary and renal specialist from the spinal unit told me that this was because the kidney contained a very large cancerous tumour! Apparently renal tumours are very rare in anyone of my age.

After everything I've been through our felt as though my world had been taken from under me yet again. The renal specialist wanted to act very quickly before the tumour had a chance to spread elsewhere. It was decided that the safest option would be to remove my right kidney. So in January of 1995, only 18 months after my spinal accident I was again in a hospital bed wondering how long left I had to live.

The kidney was removed and after analysis by the renal laboratory it was found that the tumour, although large was benign in nature. To this day I still have to go undergo regular scans on my remaining kidney which thankfully is still functioning correctly. I wondered if the tumour in my kidney was in any way related to the trauma I suffered with my spinal cord injury. The doctors ruled that out categorically. After a lot of research on my part I discovered that when the body suffers a major trauma like mine in 1994, then these tumours can occur without reason afterwards. But there is no medical evidence supporting this.

Obviously, this set my overall recovery and progress back a long way. The incision required to remove the tumour goes from the front of my stomach round to the small of my back on the right side. This is major surgery for anyone to undergo and as a tetraplegic my recovery was going to be a lot longer and a lot harder.

It took a further six months to fully recover from the effects of this surgery. I lost a lot of the movement and function I had already regained and once again I was an emotional low. I managed to get a further admission to an excellent rehabilitation centre which is owned and funded by my former employer. With further hard work and persistence I regained the mobility and function to the level that it was before the surgery.

In my experience of spinal cord injury, my physical recovery continued albeit at a much slower pace for two to three years after my injury. Things have improved a lot since then as well, but this is more increased stamina and the ability to think problems through and find other ways of managing tasks that are no longer possible because of my restrictive range of movement.

Present Day: At the time of writing this I am ten years post injury. I can walk with the

aid of elbow crutches for very short distances indoors. My left arm never recovered any useful practical function. My right arm now has about 30 percent normal range of movement. I can lift it to about shoulder height. My right hand, very fortunately I was right-handed before my accident, has recovered a weak but effective grip. I still require help with some personal needs but have managed to use what movement I have to complete a variety of tasks independently.

The Doctor's final prognosis was that my central spinal cord was where the irreversible damage was. Apparently some nerves are relatively intact around this area. Central cord syndrome results in weaker arms than legs. Even with my restrictive movements and lack of arm function amazing things are possible. I use a variety of adapted aids and equipment around the house.

In 1997 I managed to get driving again in an adapted vehicle. So as you can see there are still many possibilities for a fulfilling life after the devastating effects of paralysis and spinal cord injury

Since that fateful day life has changed beyond comprehension for me. I no longer have a good job and the security that came with it, but somehow I don't miss it as much now as I did in the early days. I am no longer married but divorced amicably with my ex-wife. I see my children at least three times most weeks, they are just the thing to keep anyone feeling young!

Before my accident I didn't know a hard drive from a floppy one :~) Now I consider myself pretty advanced in the computer literacy field. This is my most major website to date and computing has really helped fill a void in my life left after my accident as I was unable to continue with my sporting pursuits.

Computers, contrary to popular belief aren't just for sending emails, there's a hundred and one other things you can do with them. I regularly talk to friends from just around the corner to as far a field as New Zealand and Australia. Additionally my computer is a music player, fax machine, TV and DVD player and I compile my own CDs.

My life these days is very fulfilling. I have developed a lot of new interests and hobbies. Where a lot of doors closed on the day of my accident, as many, if not more have opened since then. Life with a spinal cord injury can be immensely challenging, and yes, I still have 'bad' days. With time and knowledge you can rise above those challenges and start living the life you never ever thought you'd see again. I have and am here to prove it. I have been on skiing trips in the last two years and have a great life with 'Henry' my assistance dog always by my side

Please have a look around the rest of this web site, if you have any further questions you can.....

<http://www.spinal-injury.net/my-spinal-cord-injury.htm>

Andy

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