

EDITOR'S PAGE

What would make a dietary intake adequate in individuals with spinal cord injury



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The main international meeting of all involved in SCI is the ISCoS Annual Scientific Meeting. You will have received notice that the venue for 2016 has changed. Please consult the ISCoS website for new venue and dates because we are looking forward to welcoming you there.

Editorial business: A survey group has been evaluating how credible reviewers are when proposed by authors. It has become clear that now and then reviewers are suggested that have no scientific or healthcare practice experience and are not eligible to make reviews. Fortunately, *Spinal Cord* and *Spinal Cord: Series and Cases* have almost no such problem, but if discovered, the manuscripts will be rejected.

This November issue of *Spinal Cord* contains very interesting studies with data of importance to all.

Review: Mehta *et al* made a meta analysis of the effectiveness of transcranial direct current stimulation for the management of neuropathic pain after SCI.

Animal: Yang *et al* showed that monitoring of changes of body surface temperature of the lower extremities can be potentially used to identify the completeness of SCI in a rabbit model.

Diet: Tsunoda *et al* found that vegetable dishes, dairy products, and fruits are the key items mediating adequate dietary intake. This knowledge should be included in dietary guidelines.

Investigations: Zeller *et al* investigated acute changes in serum brain-derived neurotrophic factor (BDNF) concentrations in tetraplegic SCI athletes and found no change in basal serum BDNF concentration during a rugby training session. The values at rest were slightly higher or rather at the upper limit of what has been reported before in healthy individuals.

Urinary system: Eyre *et al* found 17% complications in 112 consecutive bladder stone removal operations with a higher risk in cervical level injury and combined procedures, causing longer hospitalization. Kozomara *et al* evaluated whether the ice water test (IWT) should be performed before or after a standard urodynamic investigation. IWT induced a gating effect on the micturition reflex volume threshold on the level of sacral interneurons and thus should not precede a standard urodynamic evaluation. Virsedá *et al* evaluated some specific risk factors for the development of urethral diverticula in male patients with SCI, which can lead to proper prevention.

Sexuality: Mergati-khoei *et al* found the psychometric properties of the Sexual Adjustment Questionnaire (SAQ) for Iranian people with SCI to be a valid measure for assessing sexual adjustment. Iezzoni *et al* found current pregnancy rates among reproductive-aged women with SCI to be similar to rates of other U.S. women with chronic mobility impairments. More information is needed about pregnancy experiences and outcomes to inform both women with SCI seeking childbearing and clinicians providing their care.

Stem cells: Jacob *et al* examine how trusted communication between individuals with SCI and physicians who care for them is affected by the discussion of advances in stem cell research and interventions locally and abroad.

Care and outcome: Chhabra and Bhalla describe how financial constraints affect all components of SCI management in all except the upper group in India. The results of the survey suggest that a very large percentage of the Indian population would find it difficult to access comprehensive SCI management. They advocate extension of essential medical coverage to unaided upper lower, lower middle and upper middle groups. Alabed *et al* bring the important message that the incidence rate of pulmonary embolism post three months of SCI remains significant, though much lower than immediately post injury.

Letters to the editor complete the issue.

The journal *Spinal Cord: Series and Cases* (www.nature.com/scsandc) is an excellent place to publish your case reports and small series studies.