

## EDITOR'S PAGE

# Men with spinal cord lesion: masculinity lost?

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Dear *Spinal Cord* reader,

The 2012 impact factor has been released and it is with pleasure that we can announce an increase to 1.899, (5 year Impact Factor: 2.143, Cited Half- Life: 7 years). The value of the impact factor as a sole way to rank journals has been criticized. But the figures learn what they learn: SPINAL CORD continues to be 'THE INTERNATIONAL VOICE OF THE SPINAL CORD'. We will work together with the authors, the editorial team and the reviewers to continue to improve the journal. I hope that you like the new cover which we plan to change regularly in the coming months.

There are many interesting manuscripts in this issue.

### Reviews:

You will find 3 reviews on important topics.

Nolan shows a lack of explicit focus on SCI men as gendered beings within literature. Masculine identity emerges in this review as vulnerable to the impact of SCI and, given the strong links identified between masculinity, rehabilitation and health, as an aspect of experience that warrants more attention than it has received.

Wang found limited and conflicting results in studies on the use of low-dose unfractionated heparin and low-molecular-weight heparin, in relation to the prevention of thrombosis and to the danger of bleeding.

Gosney *et al.* revealed qualitative trends in earthquake victim epidemiological data including SCI classification and types of medical complications. Post-disaster SCI rehabilitation services were expanded by adapting local resources with international assistance to manage the significant numbers of SCI survivors. But further research is needed as resulting SCI research was limited.

### Animal studies:

Zhu *et al.* observed dynamic proteome change correlated with SCI by ischemia-reperfusion in a rabbit model and provided a clue to this pathological mechanism by protein identification and analysis.

Basoglu *et al.* demonstrated that measurement of spinal cord conduction velocity via epidural electrical stimulation is possible and displays a significant decline after spinal cord ischemia in rats. They suggest a possible role in SCI medicine.

Redondo-Castro and Navarro showed in the rat that SCI's cause alterations in peripheral axons not affected by the injury and so important for further management. Special care has to be taken to avoid secondary complications, due to compressions or immobility.

*Central nervous system:* Sabre *et al.* found broadening of cortical activation and shift of centers of gravity during the first year after traumatic SCI depending on the recovery.

### Urology and fertility:

Finazzi-Agro *et al.* provide some important insights on the use of oral antimuscarinics (oxybutinin) in patients treated with botulinum toxin injections in the detrusor for neurogenic overactivity. After an initial reduction, patients tend to increase the dosage of the drug.

Gil *et al.* showed that in selected couples with SCI male partners, testicular sperm extraction and *in vitro* fertilization can provide excellent pregnancy outcome.

Ikbali Afzar *et al.* confirmed that a high number (42% for their group) of the patients who used CIC when leaving the SC unit changed their bladder emptying method, because of recurrent urinary tract infections, incontinence, nephrolithiasis, dependence on care givers and urethral strictures.

Vainrib *et al.* found incontinent iliovesicostomy a safe method. Results of urodynamic testing performed in the supine position and then immediately repeated in the upright position in the patient's wheelchair had little clinically important difference.

A case report and 2 interesting letters to the editor conclude this issue. Enjoy reading.