

# Autonomic Dysreflexia

## What is Autonomic Dysreflexia?

- Autonomic dysreflexia is condition that occurs due to damage to the spinal cord and the nerves that run along it, usually at the level of the 6<sup>th</sup> vertebrae
- People with autonomic dysreflexia experience massive sympathetic surges due to any kind of strong sensory stimulus, which can't be counterbalanced by the parasympathetic system. Things like having a full bladder or bowel, pressure from clothes or devices, sexual activity, injuries, menstruation, ingrown toenails, burns/blisters, or quick temperature changes can cause these events.
- These storms can be dangerous because of the extremely high blood pressure that can occur with it. Sometimes the crisis can be improved by removing the stimulus but may also require emergency medical care to prevent stroke, seizures, heart attack, or death due to dangerous untreated blood pressure levels.

## What are the symptoms?

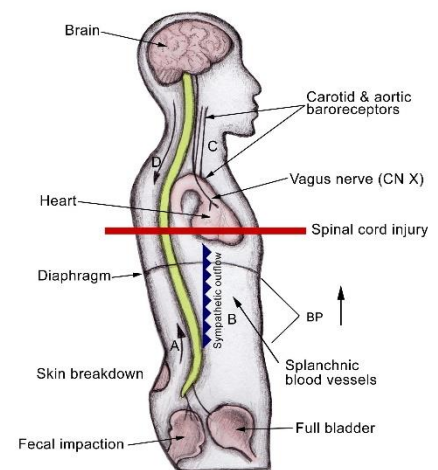
- Hypertension, often severe
- Flushed face, redness or blotchiness of the skin, and sweating above the level of the spinal injury
- Goosebumps and cold, clammy skin below the level of the spinal injury
- Nausea
- Pounding headache
- Slow heart beat
- Pupillary constriction
- Nasal congestion

## How is it diagnosed?

- Patient history of spinal cord injury
- Occurrences of severe hypertension with stimulus, with possible slow heart rate

## How is it treated?

- Get patient sitting – this causes an orthostatic response to occur and takes advantage of getting blood to pool in the extremities
- Remove stimulus if necessary – empty bladder or bowel, remove restrictive clothes
- Treat hypertension with medication and monitor every 2-3 minutes until it is resolved. Poor or little response requires emergency medical care
- Making sure that there is proper bladder and bowel care can help prevent autonomic dysreflexia, as full bladder and bowel are the most common cause of attacks



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Check out our Patient Handbook at  
<https://www.dysautonomiasupport.org/handbook>

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