Prevalence of Depression and Pain Among Patients with Spinal Cord Injury in Iran: A Systematic Review and Meta-Analysis

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Abstract

Context: Spinal cord injury (SCI) is a malignant disorder that causes several adverse effects on all aspects of the individual’s life and disrupts the normal routine of life (1). Car accidents and other causes of spinal cord injuries are among the most dangerous physical harms and even life threatening events (2). Several factors lead to SCI, i.e., earthquake, car accident, and war (3, 4). According to released statistics, the SCI has a high rate in the developing countries; in other words, about 25.5 million people are added to the affected population every year (5), which emphasizes the need to pay more attention to such patients (6).

According to previous studies, chronic diseases are important (7-11); for example, trauma is associated with many complications (12, 13). Patients with SCI undergo changes in their health status due to developed diseases, which can be attributed to the reduced quality of life (QoL) (14), pain (15), and increased depression (16) that all make reviewing their general prevalence very beneficial. The QoL of patients with SCI is lower than that of the general population (17). Although SCI affects the life condition of the patient as well as his/her family members - i.e., the spouse, parents, and children, improving the QoL in such patients can be targeted as a rehabilitation goal (18).

Pain management is one of the critical factors in the improvement of patients’ health status (19, 20). People with SCI may experience one or more types of pain simultaneously including neuropathic and musculoskeletal pain (21-23). In patients with SCI, in addition to pain, self-care and mobility, due to moving in a wheelchair, are disrupted, which causes significant anxiety and depression in such patients (16, 24-26). The study of pain prevalence can indicate the issues of patients with SCI, although its prevalence varies in different studies; thus, the study of the general prevalence of pain is of great importance (27).
2. Objectives

Considering the importance of evaluating depression and pain in patients with SCI, the present study aimed at determining the level of depression and pain among patients with SCI through a systematic review and meta-analysis.

3. Methods

3.1. Study Protocol

The current study was conducted based on the protocol of systematic review and meta-analysis (PRISMA) (28). The present systematic review was conducted on Iranian literature from the first article published on 28 August 2018 until the study time.

3.2. Search Strategy

Databases including SID, Magiran, IranMedex, IranDoc, Scopus, PubMed, ScienceDirect, Web of Science, and ProQuest were searched using the keywords such as depression, pain, patients with spinal cord injury, spinal cord injury, trauma, and Iran, and the references of recovered articles were also searched in order to ensure the recovery of all utilized articles. The Persian keywords were utilized for Persian language articles.

3.3. The Study Population

The patients with SCI in Iran were considered as the study population in the current systematic review and meta-analysis.

3.4. Inclusion and Extraction Criteria

The primary inclusion criteria were: being a descriptive analysis and availability of the full text. Review articles and letters to the editor were excluded, and ultimately, the eligible articles were enrolled (Figure 1).

The quality of evaluated articles was assessed by two highly qualified researchers; the primary search was performed separately, and in case of disagreements, the validity of the article was assessed by a third researcher. In addition, all the researchers reported their findings in a joint meeting and the results were approved by all parties.

3.5. Data Extraction

The data were collected by a checklist including the name of the author, year of the publication, sampling, sample attributes, data collection method, and conclusions.

3.6. Statistical Analysis

Data were analyzed using comprehensive meta-analysis (CMA) software. In order to evaluate the heterogeneity, Cochran’s Q test and I² were applied (the heterogeneity among articles was categorized into three groups of less than 25% (low heterogeneity), 25% - 75% (moderate heterogeneity), and more than 75% (high heterogeneity)). To measure heterogeneity among articles (I² > 50%), Der Simonian and Laird developed a random-effect model that combines studies and estimates shared prevalence; however, for low heterogeneity, the fix effect was used. In order to examine publication bias, the Begg-Mazumdar Kendall tau test and funnel plot were utilized.

4. Result

The features of eligible articles are shown in Tables 1 and 2. According to Table 1, five articles on depression were included in the current systematic review. All studies enrolled in the current review were descriptive or descriptive-analytical.

The findings of Table 2 show the features of seven articles on pain entered into the current systematic review. The overall prevalence of pain was reported in four studies including Azma and Ettefaghe (33), Modirian et al. (34), Khazaelpour et al. (35), and Matin et al. (31), and meta-analysis of pain outcomes was performed in four studies (Table 2).

The findings of Figure 2 show the prevalence of mild depression in patients with SCI (Q = 2.126, I² = 5.91, P = 0.345). According to the findings, the prevalence of depression was 22.6% (95% confidence interval, CI: 17.5% - 28.8%).

The findings of Figure 3 show the prevalence of moderate depression in patients with SCI (Q = 4.941, I² = 59.51, P = 0.085). According to the findings, the prevalence of moderate depression was 19.6% (95% CI: 14.7% - 25.7%).

The findings of Figure 4 show the prevalence of severe depression in patients with SCI (Q = 2.55, I² = 21.81, P = 0.27). According to the findings, the prevalence of severe depression was 12.1% (95% CI: 8.3% - 17.3%).

The findings of Figure 5 show the prevalence of no-depression in patients with SCI (Q = 2.55, I² = 85.86, P = 0.001). According to the findings, the prevalence of no-depression was 46.5% (95% CI: 26.7% - 67.5%).

Figure 6 shows the amount of publication bias in articles on depression entered into the meta-analysis phase. As shown in the figure, there was no publication bias (Z value for tau = 0.52, P = 0.5).

The findings of Figure 7 show the prevalence of pain in patients with SCI (Q = 22.58, I² = 86.70, P < 0.001). According to the findings, the prevalence of pain was 65.9% (95% CI: 53.9% - 76.1%).

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Records identified through database searching (n = 224)
Additional records identified through other sources (n =)
Records after duplicates removed (n = 54)
Records screened (n= 50)
Records screened (n= 20)
Ful-text articles assessed for eligibility (n = 0)
Ful-text articles excluded, with reasons (n = 0)
Studies included in quantitative synthesis (n = 8)
Studies included in quantitative synthesis (meta-analysis) (n = 12)

**Figure 1. Flowchart of systematic review and meta-analysis**

**Figure 8** shows the amount of publication bias in articles on pain entered into the meta-analysis phase (Z value for tau = 0.000, P = 0.5).

**5. Discussion**

Trauma leads to patients’ hospitalization and causes neurological problems (36, 37). The present systematic review and meta-analysis was conducted on the prevalence of depression and pain among patients with SCI in Iran. Depression and pain are in adverse relationship with the QoL and can negatively affect it. Thus, paying more attention to depression and pain in such patients is of great importance (38-40). The findings of the current study showed that of the five articles published in Iran on the prevalence of depression in patients with SCI, three had inclusion criteria for meta-analysis. According to the findings, the prevalence of mild depression in patients was 22.6% (95% CI: 17.50 - 28.8); the prevalence of moderate depression was 19.6% (95% CI: 14.7% - 25.7%), and the prevalence of
Table 1. Features of Eligible Articles on Depression

| Author’s Name          | Objective                                                                 | Sampling      | Sample Attributes | Data Collection Method        | Conclusion                                                                 |
|------------------------|---------------------------------------------------------------------------|---------------|-------------------|--------------------------------|----------------------------------------------------------------------------|
| Mohammadi et al. (29)  | Relationship between fatigue, depression, and functional level of patients with SCI | Non-randomly available | 108 patients with SCI | Questionnaire with 20 items about the Zang depression | The mean score of depression in patients was 6.63% (N = 2)       |
| Mokhber Dezfoley et al. (16) | Depression in patients with SCI                                             | 51 patients with SCI | Beck depression inventory | N = 9 (17.6%), severe; N = 14 (27.5%), moderate; N = 15 (29.4%), mild; N = 13 (25.5%), no depression |
| Khazaeipour et al. (10) | Depression in patients with SCI                                             | 134 participants with SCI | Beck depression inventory II, Persian version | Frequency of depression was 49.3% (N = 66); N = 68 (50.7%), minimal; N = 28 (20.9%), mild; N = 24 (17.9%), moderate; N = 14 (10.4%), severe |
| Matin et al. (31)      | Depressive mood and fatigue in patients with SCI                           | Traumatic SCI  | 30 patients with SCI | Beck depression inventory     | 66.7% had normal mood (BDI < 10) and only 30.3% had severe depression (BDI: 31 - 40); N = 20 (66.7%) normal; N = 5 (16.7%) mild mood disturbances; N = 2 (6.7%) borderline clinical depressive mood; N = 1 (3.3%) severe depression |
| Rahnama et al. (32)    | -                                                                         | 93 male patients with SCI | Hospital anxiety and depression scale (HADS) | 14 (15%) patients had depression |

Figure 2. Prevalence of mild depression in patients with SCI

Meta Analysis

The current study findings showed that seven articles, conducted on the prevalence of pain in patients with SCI, also investigated different types of pain in different parts of the body. Out of the seven articles, four addressed the general prevalence of pain as 65.9% (95% CI: 53.9% - 76.1%). In a study by Mahnig et al., conducted on the prevalence of pain in patients with SCI, the findings indicated that 58% of the patients experienced musculoskeletal pain (42). The systematic review and meta-analysis performed by Burke,...

severe depression was 12.1% (95% CI: 8.3% - 17.3%), and 46.5% of patients (95% CI: 26.7% - 67.6%) had no depression. In a meta-analysis by Williams and Murray on the prevalence of depression in 19 articles on patients with SCI, the results indicated the general prevalence of depression as 22.2% (95% CI: 18.7% - 26.3%) (41). In the study by Tzanos et al. (25), in Greece, 18.2% of patients were diagnosed with depression, of which 45.7% had minimal, 36% mild, 12.8% moderate, and 3.7% experienced moderately severe depression (25).
Table 2. Features of Eligible Studies on Pain

| Author Name | Objective | The Cause of SCI | Sample Attributes | Data Collection Method | Conclusion |
|-------------|-----------|------------------|-------------------|------------------------|------------|
| Sedghi Goyaghaj et al. (23) | Prevalence and severity of pain in patients with SCI | The incidence of war, vehicle collision, height fall, and spinal cord tumors | 248 patients with SCI referring to Khatam-ol-Anbia Hospital, Tehran | International pain inventory for patients with SCI | The prevalence of neuropathic pain was 82.3% (N = 204), musculoskeletal pain 81% (N = 201), visceral pain 41.2% (N = 102), and other pain 1.2% (N = 2) |
| Emami Razavi et al. (15) | Different types of pain in SCI | Accident, fall, falling of a heavy object on the patient, violence and diving | 89 patients with SCI | Short-form McGill pain questionnaire (SF-MPQ-2) | The mean prevalence of neuropathic pain was 20.14% ± 12.23%, affective 4.19% ± 6.21%, intermittent 12.23% ± 11.03%, and continuous 15.50% ± 14.52% |
| Hassanjirdehi et al. (17) | Evaluation of pain and its effect on QoL and functioning in patients with SCI | Male veterans with SCI | 58 patients with SCI | EuroQol questionnaire and general health questionnaire | The prevalence of pain in the lumbar regions was 63.8%, the cervical region 39.7%, and 51.7% in the shoulder regions. According to the findings, there was a significant and direct relationship between the prevalence of pain and low QoL, high anxiety, and depression |
| Azma and Ettefaghe (33) | The prevalence of chronic pain and factors affecting it | Traumatic SCI resulted from the Bam earthquake | 80 patients developed SCI after Bam earthquake | - | Generally 66 (82.5%) patients complained of pain of them 38 were female (86.4%) and 28 (77.8%) male |
| Modirian et al. (34) | Chronic pain after SCI | Patients in 26 provinces affected by the Iran-Iraq war | 1295 patients with SCI resulted from war | Data consisting of type and site of pain, and exacerbating or palliative factors | The general prevalence of pain was 65.7%. The prevalence of pain was 83% in the lumbarosacral region, 62.3% in the thoracic cavity, and 45.4% in the cervical region |
| Khazaeipour et al. (35) | The prevalence of chronic pain and its correlation with social support and socioeconomic indices | Crash injuries, falling, sport injuries, occupational injuries, etc. | 140 individuals with SCI | Brief pain inventory | The general prevalence of pain was 50.2%. The majority of pain sites included knees (50%), shins (45.7%), calves (42.9%), feet (41.4%), ankles (38.6%), and lower back (31.4%) |
| Matin et al. (31) | Depressive mood and fatigue in patients with SCI | Traumatic SCI | 30 patients with SCI | Numerical rating scale | No pain: 0 (63.3%); mild pain: 1 (16.7%); moderate pain: 2 (10.0%); severe pain: 3 (6.7%); general prevalence pain: 19 (63.3%) |

Figure 3. The prevalence of moderate depression in patients with SCI

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et al., indicated that the general prevalence of neuropathic pain was 53% (95% CI: 38.58% - 67.47%) (43). Among the studies investigated pain in such patients, the study by Muller et al., indicated the prevalence of pain in the last week of follow-up as 68.9% and the chronic pain as 73.5% (44).

One of the limitations of the study was that the enrolled articles did not utilize the demographic questionnaire, which led to the small number of quantitative articles eligible to enter the meta-analysis phase. In addition, one of the strengths of the current study was its nobility, to such an extent that no study was conducted in this regard so far.

5.1. Conclusions

Considering the high prevalence of pain and depression among patients with SCI, it is essential to take appropriate measures to prevent depression and pain in such patients in order to improve their health status and QoL.
**Study Name** | **Statistics for Each Study** | **Event Rate and 95% CI** | **Relative Weight**
--- | --- | --- | ---
Aza.2012 | Event Rate: 0.825, Lower Limit: 0.726, Upper Limit: 0.924, Z Value: 5.270, P Value: 0.000 | | 22.32 |
Modiran.2010 | Event Rate: 0.657, Lower Limit: 0.631, Upper Limit: 0.682, Z Value: 11.103, P Value: 0.000 | | 31.16 |
Khazaiepour.2017 | Event Rate: 0.507, Lower Limit: 0.425, Upper Limit: 0.589, Z Value: 0.166, P Value: 0.968 | | 27.83 |
Matin.2015 | Event Rate: 0.633, Lower Limit: 0.451, Upper Limit: 0.784, Z Value: 1.439, P Value: 0.150 | | 18.69 |

Favours A | Favours B
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-1.00 | -0.50 | 0.00 | 0.50 | 1.00

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**Figure 7.** The prevalence of pain in patients with SCI

**Figure 8.** Publication bias in studies on pain

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**Footnotes**

**Conflict of Interests:** Authors declared no conflict of interest.

**Ethical Approval:** IR.KUMS.REC.1397.821.

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