

Correlation between Function in the Sitting Test and Prediction of Fall Risk among Paraplegic Patients

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ABSTRACT

Introduction: Falls are a common and potentially serious complication among individuals with paraplegia, often occurring during sitting activities and transfers. Assessment of sitting balance and functional control is therefore critical in identifying individuals at higher risk of falls. The Function in Sitting Test (FIST) is a reliable and clinically feasible tool to evaluate sitting balance; however, its role in predicting fall risk among paraplegic patients has not been adequately explored.

Aim: To find a relationship between FIST and the prediction of fall risk among paraplegic patients.

Materials and Methods: The study was conducted in a rehabilitation centre at Bhubaneswar. Fifteen participants below T6 involvement paraplegic patients aged 18 to 65 years were included. The 16-

element containing spinal cord injury fall concern scale was used to assess the fall history. The FIST, which includes 14 items to test balance, was then administered. The participants performed each test three times, after which the mean was determined for analysis of the data. To maintain the circadian rhythm, all assessments and tests were conducted in the morning.

Results: The finding demonstrated a significant negative correlation ($r=-0.86$) between FIST score and fall risk, indicating that lower sitting function was associated with a high risk of falls.

Conclusion: The FIST may be an effective clinical tool for the prediction of fall risk among paraplegic patients.

Keywords: Accidental falls, Paraplegia, Rehabilitation centres, Spinal cord injury.

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