

Authors Year Country Date of Studies Included AMSTAR Score Total Sample Size	Method	Conclusions
<p>Dorstyn et al. (2011) Australia Review of published articles between January 1980 and April 2010 AMSTAR=10 N=10</p>	<p>Method: Comprehensive literature search of English RCT, Cohort studies, case series, and review articles of traumatic SCI in adult age group (18+yr). Databases: MEDLINE, Psych Info, Cochrane Library, Meditext, CINAHL, Scopus. Level of evidence: Effect sizes were provided Questions/measures/hypothesis: Examine the effectiveness of cognitive behavioural therapy (CBT) in improving psychological outcomes post SCI.</p>	<ol style="list-style-type: none"> 1. Effect sizes for assertiveness, coping, self-efficacy, depression, acceptance, anxiety, locus of control and self-esteem ranged from very small to large post CBT treatment. 2. Moderate to large effect sizes were seen in quality of life post CBT treatment.
<p>Mehta et al., (2011) Canada Review of published articles between January 1990 to October 2010 AMSTAR=10 N=9</p>	<p>Method: Comprehensive literature search of English RCT, Cohort studies, case series, and review articles of traumatic SCI in adult age group (18+yr). A meta-analysis was conducted. Databases: MEDLINE, Psych Info, CINAHL, EMBASE. Level of evidence: <i>Moderate quality:</i> Downgraded high-quality studies, non-randomized trials, prospective cohort studies; <i>Low quality:</i> Retrospective observational, retrospective cohort and case-control studies; <i>Very low quality:</i> Case series, case reports, reviews and others. Effect sizes were provided Questions/measures/hypothesis: Examine the effectiveness of Cognitive Behavioural Therapy (CBT) in improving psychological outcomes post SCI.</p>	<ol style="list-style-type: none"> 1. One study demonstrated large effect sizes in the improvement of depression symptoms post CBT treatment; 4 studies demonstrated moderate effects; 4 studies demonstrated small effects. These effects were shown to last for up to 2yr in individuals diagnosed with major depressive disorder prior to the intervention. 2. Moderate effects sizes were seen on anxiety symptoms were seen in 2 studies post CBT treatment; 2 studies reported small effect sizes and 1 study reported no effect of CBT on anxiety symptoms post SCI. 3. CBT treatment resulted in small effects on self-esteem, coping and adjustment post SCI.
<p>Elliot & Kennedy (2004) USA Time line not stated AMSTAR=7 N=9</p>	<p>Method: Comprehensive literature search of English RCT, Cohort studies, case series, and review articles of traumatic SCI in adult age group (18 + years). Databases: MEDLINE, PsycInfo. Level of evidence: <i>Moderate quality:</i> Downgraded high-quality studies, non-randomized trials, prospective cohort studies; <i>Low quality:</i> Retrospective observational, retrospective cohort and case-control studies; <i>Very low quality:</i> Case series, case reports, reviews and others. Questions/measures/hypothesis: Examine the effectiveness of depression treatment post SCI.</p>	<ol style="list-style-type: none"> 1. There was moderate level evidence from 3 studies for psychological interventions in improving depressive symptoms post SCI. 2. There was high level evidence from 1 study and low level evidence from 4 studies for the use of antidepressants for depressive symptoms post SCI. 4. Functional electrical stimulation (FES) was supported by 1 moderate level study.