Author Year; Country Score Research Design Total Sample Size	Methods	Outcome
Tate et al. 2016 North America Cross-sectional Level 5 N=291	Objective: Assess the factors associated with methods of bowel management and bowel-related complications; and (2) determine the risk factors associated with bowel complications and overall bowel dysfunction.  Population: N=291 Level: Incomplete paraplegia: 12.7 Complete paraplegia: 32.0 Incomplete tetraplegia: 26.1 Complete tetraplegia: 29.2 Etiology: Traumatic Age: 50.7 +- 12.5 Time since injury: 20 +- 10.5 yrs Female: 26.1 Treatment: N/A Outcome Measures: The Bowel and Bladder Treatment Index (BBTI), Fecal Incontinence Severity Index (FISI), Neurogenic Bowel Dysfunction Score (NBD) and self-report of constipation or incontinence, etc.	1. Having a history of bowel surgery (P<.05); using laxatives, medications, or both, as a main method (P<.0005); receiving caregiver services (P<.05); and experiencing more frequent abdominal pain (P<.005) were all associated with constipation.
Adriaansen et al.  2015  Netherlands  Cross-sectional  Level 5  N=258	Objective: To describe long-term bowel management and NBD in individuals who have been living with an SCI for at least 10 years in The Netherlands Population: N=258 Level (%): AIS A: 70% AIS B: 12%	1. The most commonly used defecation methods (as main or supplementary method) were digital evacuation (35%) and mini enemas (31%).

Author Year; Country Score Research Design Total Sample Size	Methods	Outcome
	AIS C: 9% AIS D: 9% Etiology: 90% traumatic Mean Age (range): 48 (29-65) Mean time since Injury (range): 24 (10-47) % Female: 27 (%) Study Duration: Nov 2011 - Feb 2014 Treatment: N/A Outcome Measures: 1. Bowel management and bowel problems using international SCI bowel function data set 2. Constipation (Rome III criteria) 3. Bowel management (spinal cord independence measure) 4. Satisfaction 5. NBD score	
Khadour et al.  2023 China Observational Level 5 N=294	Objective: This study aimed to describe the bowel programs utilized by people with SCI in China and the impact of bowel dysfunction on the quality of life (QoL).  Population: The two questionnaires were sent to 413 SCI patients. Two hundred ninety-four participants (43.1±14.5 years of age; men, 71.8%) responded.  Treatment: N/A Outcome Measures: A neurogenic bowel dysfunction (NBD) score is a	1. Most of the respondents performed their bowel movement daily 153 (52.0%), a defecation time was 31–60 min among 70 (23.8%) of them, 149 (50.7%) used medication (drops or liquid) to treat constipation, and 169 (57.5%) used digital stimulation more than once per week to boost the bowel evacuation.

Author Year; Country Score Research Design Total Sample Size	Methods	Outcome
	questionnaire developed to evaluate the severity of neurogenic bowel dysfunction. A Short Form-12 (SF-12) was designed to measure the quality of life in people with SCI.  Demographic and medical status information was extracted from their medical records.	