

<b>Author Year; Country Score Research Design Sample Size</b>	<b>Methods</b>	<b>Outcome</b>
<p><a href="#">Kutzenberger, 2007</a> Germany Case series Level 4 Initial N=464 Final N=440</p>	<p><b>Population:</b> 440 SCI patients (190 tetra, 274 para) ranging from 0.5 to 46 years since injury. <b>Treatment:</b> Sacral deafferentation and implantation of a sacral anterior root stimulator. <b>Outcome Measures:</b> Presence of AD.</p>	<p>1. Autonomic dysreflexia disappeared in all cases with the exception of two. In these individuals, blood pressure was maintained at less dangerous levels.</p>
<p><a href="#">Hohenfellner et al. 2001</a> Germany Pre-post Level 4 N=9 (with AD=5)</p>	<p><b>Population:</b> detrusor hyperreflexia. <b>Treatment:</b> sacral bladder denervation. <b>Outcome Measures:</b> bladder capacity, blood pressure, symptomatic AD.</p>	<p>1. Episodes of detrusor hyperreflexia and AD were eliminated in all cases. 2. In the 5 patients with AD, both SBP and DBP were reduced 196(16.9) to 124(9.3) mmHg and 114(5.1) to 76(5.1) mmHg, respectively.</p>
<p><a href="#">Schurch et al. 1998</a> Switzerland Case series Level 4 N=10</p>	<p><b>Population:</b> 10 SCI patients with AD. <b>Treatment:</b> sacral deafferentation. <b>Outcome measures:</b> continuous non-invasive recordings of BP and HR during urodynamic recordings, pre- and post-operative data.</p>	<p>1. There was a marked elevation in systolic and diastolic BP with bradycardia during the urodynamic examination in all eight patients, despite complete intra-operative deafferentation of the bladder in five. 2. AD persisted in patients with SCI even post complete sacral deafferentation, consistently occurring during the stimulation-induced voiding phase.</p>