



This data sheet is a quick reference on demographics and the use of services by people with spinal cord injury in the United States (U.S.). Much of the information reflects recent data collected since 2015. Historical information reflects data collected since the early 1970s.

The National Spinal Cord Injury Database is a prospective longitudinal multicenter study that currently captures data from an estimated 6% of new SCI cases in the United States. The database has demographic and condition status data through 2020 for 34,734 people with SCI.

National SCI Statistical Center  
515 Spain Rehabilitation Center  
1717 6th Avenue South  
Birmingham, AL 35233-7330

For Statistics: 205-934-3342  
For Business: 205-934-3320  
TDD: 205-934-4642  
FAX: 205-934-2709  
E-mail: [NSCISC@uab.edu](mailto:NSCISC@uab.edu)  
Website: [uab.edu/NSCISC](http://uab.edu/NSCISC)

## Incidence

The 2020 population size in the United States was estimated to be about 331 million people. The most recent estimate of the annual incidence of spinal cord injury (SCI) is approximately 54 cases per one million people in the United States, which equals about 17,900 new SCI cases each year. New SCI cases do not include those who die at the location of the incident that caused the SCI.

- **Data Source:** Jain NB, Ayers GD, Peterson EN, et al. Traumatic spinal cord injury in the United States, 1993-2012. *JAMA*. 2015;313(22):2236-2243.

## Prevalence

The estimated number of people with SCI living in the United States is approximately 296,000 persons, with a range from 252,000 to 373,000 persons.

- **Data Source:** Lasfargues JE, Custis D, Morrone F, Carswell J, Nguyen T. A model for estimating spinal cord injury prevalence in the United States. *Paraplegia*. 1995;33(2):62-68.

## Age at Injury

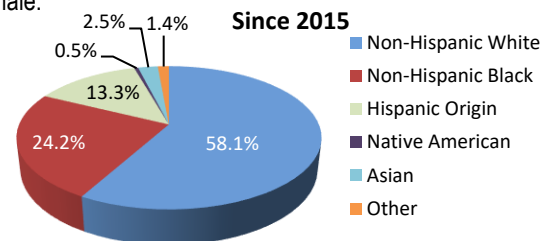
The average age at injury has increased from 29 years during the 1970s to 43 since 2015.

## Sex

About 78% of new SCI cases since 2015 are male.

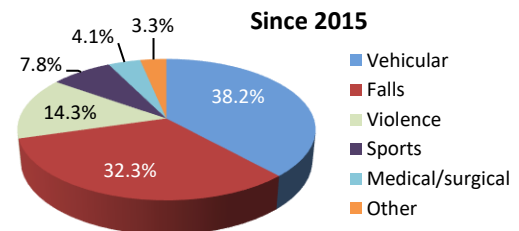
## Race/Ethnicity

Recently, about 24% of injuries have occurred among non-Hispanic blacks, which is higher than the proportion of non-Hispanic blacks in the general population (13%).



## Cause

Vehicle crashes are the most recent leading cause of injury, closely followed by falls. Acts of violence (primarily gunshot wounds) and sports/recreation activities are also relatively common causes. A customizable Leading Causes of SCI tool is at [uab.edu/NSCISC](http://uab.edu/NSCISC).

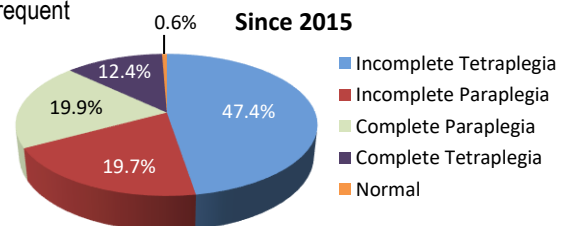


## Lengths of Stay

Lengths of stay in the hospital acute care unit have declined from 24 days in the 1970s to 11 days recently. Rehabilitation lengths of stay have also declined from 98 days in the 1970s to 30 days recently.

## Neurological Level and Extent of Lesion

Recently, incomplete tetraplegia is the most frequent neurological category. The frequency of incomplete and complete paraplegia is virtually the same. Less than 1% of persons experienced complete neurological recovery by the time of hospital discharge.



## Education

Since 2015, about a quarter of persons with SCI have a college degree at the time of their injury, compared with 46% of people who survived 40 years of injury.

Education (%)	At Injury	Year 1	Year 10	Year 20	Year 30	Year 40
<b>High School Only</b>	51.7	52.2	50.2	46.4	41.8	34.6
<b>College or Higher</b>	23.7	26.1	27.6	26.7	34.9	45.6

## Occupational Status

Since 2015, 18% of persons with SCI are employed at year 1 post-injury. The employment rate increases over time to 32% at 30 or more years post injury.

Status (%)	At Injury	Year 1	Year 10	Year 20	Year 30	Year 40
<b>Employed</b>	68.3	18.2	24.8	30.0	31.9	32.3
<b>Student</b>	7.6	7.0	2.8	0.8	0.3	0.0

## Marital Status

Since 2015, the percentage of people who are married is relatively consistent up to year 30 post-injury, with single/never married status slowly decreasing and divorce status slowly increasing.

Status (%)	At Injury	Year 1	Year 10	Year 20	Year 30	Year 40
<b>Single</b>	44.3	42.8	37.3	37.2	33.4	24.5
<b>Married</b>	37.8	37.0	34.2	34.5	35.4	44.3
<b>Divorced</b>	8.7	10.5	19.3	19.3	21.8	21.6

## Re-Hospitalization

Since 2015, about 30% of persons with SCI are re-hospitalized one or more times during any given year following injury. Among those re-hospitalized, the length of hospital stay averages about 18 days. Diseases of the genitourinary system are the leading cause of re-hospitalization, followed by disease of the skin. Respiratory, digestive, circulatory, and musculoskeletal diseases are also common causes.

## Historical Lifetime Costs

The average yearly expenses (health care costs and living expenses) and the estimated lifetime costs that are directly attributable to SCI vary greatly based on education, neurological impairment, and pre-injury employment history. The below estimates do not include any indirect costs such as losses in wages, fringe benefits, and productivity (indirect costs averaged \$78,633 per year in 2020 dollars).

Severity of Injury	Average Yearly Expenses (in 2020 dollars)		Estimated Lifetime Costs by Age at Injury (discounted at 2%)	
	First Year	Each Subsequent Year	25 years old	50 years old
<b>High Tetraplegia (C1–C4) AIS ABC</b>	\$1,163,425	\$202,032	\$5,162,152	\$2,837,031
<b>Low Tetraplegia (C5–C8) AIS ABC</b>	\$840,676	\$123,938	\$3,771,791	\$2,319,988
<b>Paraplegia AIS ABC</b>	\$567,011	\$75,112	\$2,524,270	\$1,656,602
<b>Motor Functional at Any Level AIS D</b>	\$379,698	\$46,119	\$1,724,594	\$1,217,266

**Data Source:** Economic Impact of SCI published in the journal *Topics in Spinal Cord Injury Rehabilitation*, Volume 16, Number 4, in 2011. ASIA Impairment Scale (AIS) is used to grade the severity of a person's neurological impairment following spinal cord injury.

## Historical Life Expectancy

The average remaining years of life for persons with SCI have not improved since the 1980s and remain significantly below life expectancies of persons without SCI. Mortality rates are significantly higher during the first year after injury than during subsequent years, particularly for persons with the most severe neurological impairments. A customizable Life Expectancy Calculator tool is at [uab.edu/NSCISC](http://uab.edu/NSCISC).

Age at Injury	Life Expectancy (years) for Post-Injury by Severity of Injury and Age at Injury										
	No SCI	For Persons Who Survive the First 24 Hours					For Persons Surviving at Least 1 Year Post-Injury				
		AIS D Motor Functional (Any Level)	AIS ABC Para	AIS ABC Low Tetra (C5–C8)	AIS ABC High Tetra (C1–C4)	Ventilator Dependent (Any Level)	AIS D Motor Functional (Any Level)	AIS ABC Para	AIS ABC Low Tetra (C5–C8)	AIS ABC High Tetra (C1–C4)	Ventilator Dependent (Any Level)
20	59.4	52.1	44.8	39.2	32.5	10.0	52.5	45.2	40.1	33.6	17.1
40	40.7	35.0	29.6	24.8	20.7	8.7	35.2	30.0	25.5	21.7	13.1
60	23.3	19.4	16.1	13.1	11.2	3.7	19.6	16.5	13.8	12.4	7.9

## Historical Causes of Death

Persons enrolled in the National SCI Database have now been followed up to 47 years after injury. During that time, the causes of death that appear to have the greatest impact on reduced life expectancy for this population are pneumonia and septicemia. Mortality rates are declining for cancer, heart disease, stroke, arterial diseases, pulmonary embolus, urinary diseases, digestive diseases, and suicide. However, these gains are being offset by increasing mortality rates for endocrine, metabolic and nutritional diseases, accidents, nervous system diseases, musculoskeletal disorders, and mental disorders. There has been no change in the mortality rate for septicemia over the past 47 years, and there has only been a slight decrease in mortality due to respiratory diseases.

© 2021 Board of Trustees, University of Alabama. This is a publication of the National Spinal Cord Injury Statistical Center in collaboration with the Model Systems Knowledge Translation Center. The contents of this publication were developed under grants from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant numbers 90DP0083 and 90DP0082). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this publication do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.

Data from the National SCI Database is from 29 federally funded SCI Model Systems since 1973. Presently, there are 14 systems and 5 Form II (follow up) centers sponsored by NIDILRR. For a complete list of current SCI Model Systems, go to [www.msktc.org/sci/model-system-centers](http://www.msktc.org/sci/model-system-centers).

**Document Citation:** National Spinal Cord Injury Statistical Center, Facts and Figures at a Glance. Birmingham, AL: University of Alabama at Birmingham, 2021.