

## **Advantages of treating workers suffering from chronic back pain by combining services of occupational health doctors and physical re-education and functional rehabilitation practitioners**

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### **Abstract**

Chronic Back Pain (CBP) is a major problem in the workplace and is responsible for considerable economic costs as well as serious social repercussions in our society. This report presents the results of a four-year study combining the findings of two different medical teams involved in the treatment of CBP : the service of the Occupational Health Department in Brest (Service de Santé au Travail en Iroise ) and a service of functional re-education, physical education and rehabilitation in Roscoff, France (Centre de Rééducation Fonctionnelle de Perharidy). Our model is based on diagnosis of CBP in various workers proposed by occupational health doctors in Brest, based on a specific protocol that covers workers suffering from CBP for more than 3 months, where there is an obvious consequence on the quality of their work. Each case was subsequently evaluated by a joint medical committee composed of doctors specialized in occupational health and doctors specialized in physical rehabilitation. On the basis of the committee's findings, it may have been possible to offer a series of physical therapy and functional re-education sessions for the back-pain suffers, as well as a study of their workstations and/or their job situation by a specialist in Ergonomics. One year later, a new evaluation of the patients' situation was systematically undertaken by comparing each individual's ODI, HAD and Karasek tests. 183 workers were presented to the joint committee of occupational health and physical rehabilitation specialists between 2010 and 2013. Only 90 cases were accepted in a program of physical therapy by the physical re-education centre. 71 of these cases were re-evaluated by the medical committee one year later. Concerning these cases, 18 workers were declared unable to work and were not asked to return to their jobs. 7 of the original 90 cases were "lost from sight". 78,9 % of the subjects included in the program were working after one year, whereas only 55,7 % of them were on their jobs at the beginning of the study. 67.9 % of the workers declared feeling a physical improvement and were suffering less back pain. 75 % of the patients were labeled as being "disabled workers". There was a 10 point improvement of their average ODI Score and their psychological profile improved since they suffered less depression and anxiety. We compared this model to other types of health care offered to patients afflicted by CBP, especially the Sherbrook model. The importance of multidisciplinary care based on the psycho-social-physical well-being profile is confirmed. On the other hand, we have not been able to attest to the apparent benefits of an ergonomic adaptation of the work station, unlike other studies. The benefits of physical rehabilitation / re-adaptation (and sports) are confirmed. A global approach using a well-defined protocol for patients (workers) diagnosed as suffering from CBP by an occupational health service and then enrolling these patients in a rehabilitation program that involves a close relationship with a physical rehabilitation centre has provided encouraging results.

### **Biography**

A Hekinian is currently employed by an occupational health care service in Brest. She studied Medicine at the University of Western Brittany (UBO - Brest) where she obtained her medical degree with a specialisation in the Care of Alcohol and Drug Dependent Patients as

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