

Chapter 3: Fitness for work

European Module for Undergraduate teaching of Occupational Medicine, EMUTOM, 2012

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Last updated version 23-07-2012

Feedback on the self assessment exercises

1. MC Question about the case of the 35 year-old carpenter Hopkins who is not able to work since five weeks because of low back pain.

MC questions

1.a.- Which clinical diagnosis would you consider to be the most appropriate at this moment?

- A. Tumor in spine,
- B. Non specific low back pain,
- C. Lumbar disc herniation,
- D. No specific medical diagnosis,
- E. Infectious disease in spine

Answer: The most appropriate diagnosis is 'non specific low back pain'. It is the most common diagnosis in first line patients with low back pain. The pain is radiating, but not past the knee (lumbar disc hernia). There are no abnormal findings in physical examination, e.g. for the test of Lasèque. He has no fever (infectious disease). It is a young patient, with a blue collar job. This all makes non specific low back pain the most probable medical diagnosis at this moment.

1.b.- Which personal factor could be the main factor in hindering return to work in this case?

- A. Age (35 years),
- B. Sex (male),
- C. Kind of work (carpenter),
- D. Civil status (married, two young children),
- E. Immobility (staying in bed)

Answer: The most important advice for a patient with non specific low back pain is 'stay active'. So his immobility, staying in bed much of the day, is probably the most important factor in maintaining his complaints. It hinders a proper rehabilitation and return to work. Since his complaints are present for a longer period now (five weeks), the right advice for Mr. Hopkins should be to convince him to get mobile and to get good activating physiotherapy (will not be easy given his bad past experience) and to start a return to work schedule with graded activity (gradually increasing load)

1.c.- Which environmental factor could be the most stimulating in return to work?

- A. Support of his boss,
- B. Regularly lifting more then 25 kg,
- C. Possibilities to do modified work,
- D. 100% resuming work is necessary,
- E. To find work at a shorter distance of his home.

Answer: given the last question obviously the answer is not to resume 100% work at once or to immediately lift 25 kg again. There is a big chance that Mr. Hopkins will not be able to do it or will soon have (more) back pain again. Support of the boss is an important supporting (environmental) factor in return to work. But the most important factor is the possibility to modify the work (time and load).

1.d.- Which intervention would you consider to be the most effective in returning to work?

- A. The GP referral to the physiotherapist,
- B. The advice to stay at home till the pain is over,
- C. The advice to stay active and mobile,
- D. To talk with the boss about a less heavy job,
- E. The advice to Hopkins to better coping pain.

Answer: we already discussed the possibility to get Mr. Hopkins more active and to adjust his work and gradually increase the workload as effective interventions in this case of non specific low back pain. The advice to stay at home till the pain is over is definitely not the right answer. The referral of the GP to a physiotherapist in the first week of complaints has proven to be not an effective therapy. Talking with the boss about a less heavy job could be effective for the short term, but it is not necessary for Mr. Hopkins to change jobs. He will be able to do his job after recovering from his back pain. The most important advice is to stay active and mobile!

2. Which history question about work is the most important for every physician to ask an adult patient?

- A. Is your job exciting,
- B. What is your job,
- C. What do you earn with your job,
- D. Are you satisfied with your job,
- E. Do you have a heavy job.

Answer: for every patient the physician should know his profession. It is an important 'contextual' factor for the patient, work can be a causal factor in the onset of the complaints / the disease and (especially important in this chapter about fitness for work) work can influence recovery, functioning of the patient and her/his return to work.

3. In the adapted ICF model the health condition has three consequences, two factors that influence them and three intervention options.

Open answer question:

a. name the three consequences, the two influencing factors and the three intervention options in the ICF model

b. give for each of the above mentioned elements (3.a.) of the ICF model a history question you can ask a patient with low back pain.

Answers:

a.

- the three consequences are: 1. disorder in function and / or anatomical structure, 2. limitations in the performance of (daily) activities, 3. problems in participating in social activities e.g. work.

- the two influencing factors are: 1. personal factors e.g. education, experience, coping capacity, motivation, and 2. environmental factors e.g. workload, social support, living situation

- the three intervention options are: 1. clinical interventions e.g. medication, treatment, 2. behavioral interventions e.g. training, coping capacity, self-acceptance, illness beliefs, skills, and 3. environmental interventions e.g. strengthen social support, adapting work

b.

- disorder in function: e.g. questions about pain, strength, endurance

- activity: e.g. questions about lifting, wearing, walking stairs, maintaining attention

- participation: e.g. questions about sick leave, participate in society

- personal factors: e.g. questions about coping, dealing with the pain

- external factors: e.g. question about perceived social support

- clinical interventions: e.g. question about treatment, multidisciplinary rehabilitation

- behavioral interventions e.g. questions about how to deal with the pain / restrictions

- environmental interventions e.g. questions about social support at the workplace

4. The acronym 'WARP' is meant to make it easier to remember the most important work and health subjects for medical students.

Open answer question:

- Please fill out: 'WARP' stands for W....., A....., R....., P.....?

Answer: Work, Activities, Referral and Prevention. See the summary of this chapter.