

Early Intervention in Cabin Crew

Michael Tew BPhy GradDipOHS

Onsite Operations Manager

Physiotherapist

michael.tew@axisrehab.com.au

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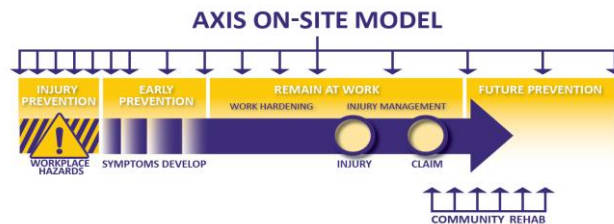
Overview

- Overview of our onsite physiotherapy services to Cabin Crew
- Case Study
- The evidence for early intervention
- Why does the right care matter?
- How successful are we?
- What does that success mean for recovery in Cabin Crew?
- Strategies for improving early access.



Onsite Physiotherapy Services to Cabin Crew

- Services delivered in five ports
- Treatment
 - Early Intervention Service for musculoskeletal disorders
 - Covers work related, non-work related and workers' compensation injuries.
 - Referral to other health professionals (GP, psychologists, specialists)



Onsite Physiotherapy Services to Cabin Crew

- Rehabilitation Services
 - Provision of suitable duties plans to ensure worker remains healthy and safe at work.
 - Worksite Assessments
 - Functional Capacity Evaluations
 - Rehabilitation Meetings
- Injury Prevention Services
 - Risk Assessment
 - Manual Handling Training
 - Health Promotion Projects
 - Consultancy with WHS Committees
 - Capability assessments of NWR injury



AXIS ON-SITE MODEL



CASE STUDY

- August 2017: Bending down to service cart on fourth sector for day (4 x BNE/SYD returns) – felt a sharp pain.
- Presented to the Axis Onsite Physiotherapy Clinic on the day of injury.
- 6/10 low back pain, progressively getting worse.
- No pins and needles, numbness.
- No previous history of low back pain.
- Anxious about symptoms getting worse, about 'permanent damage' to low back.





Early Intervention – The Evidence

• Compare 3867 Acute LBP:

1. Early intervention: 48 hours (n = 1379)
2. Intervention delivered 2-7 days following injury (n=2005); and
3. Delayed intervention of >8 days following injury (n=483)

Results:

Early intervention group = fewer physician visits, few restricted work days, fewer days away from work, shorter case duration (faster recovery).

Zigenfus, G.C., et al., Effectiveness of early physical therapy in the treatment of acute low back musculoskeletal disorders. J Occup Environ Med, 2000. 42(1): p. 35-9.



Early Intervention – The Evidence

Compare LBP cases:

1. Early physiotherapy interventions < 3 days
2. Minimum of 7 days prior to commencement of physiotherapy

Results:

Early intervention: Significantly decreased not only the incidence of chronic pain, from 15% down to 2% but also reduced the amount of lost time from work.

Linton, S.J., A.L. Hellsing, and D. Andersson, A controlled study of the effects of an early intervention on acute musculoskeletal pain problems. *Pain*, 1993. 54(3): p. 353-9.



Why Does the Right Care Matter?



Early Imaging for Acute Low Back Pain

One-Year Health and Disability Outcomes Among Washington State Workers

Janessa M. Graves, MPH, PhD,* Deborah Fulton-Kehoe, MPH, PhD,† Jeffrey G. Jarvik, MD, MPH,‡ and Gary M. Franklin, MD, MPH§

SPINE Volume 37, Number 18, pp 1617–1627



ORIGINAL ARTICLE

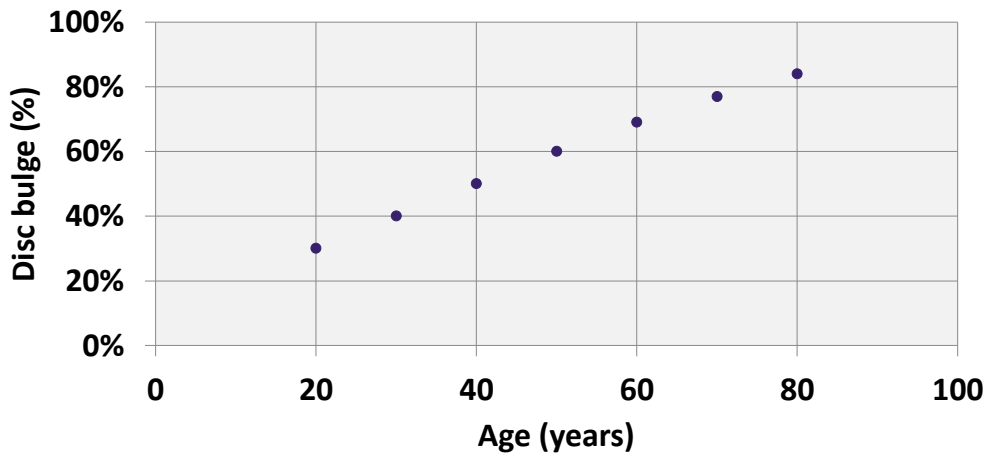
Relationship of Early Magnetic Resonance Imaging for Work-Related Acute Low Back Pain With Disability and Medical Utilization Outcomes

Barbara S. Webster, BSPT, PA-C, and Manuel Cifuentes, MD, MPH, ScD

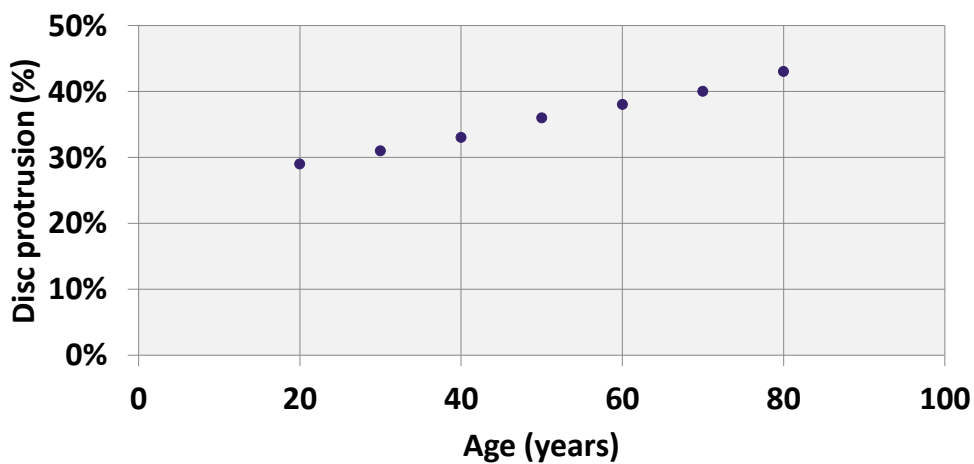
JOEM • Volume 52, Number 9, September 2010



Disc bulge in asymptomatic population

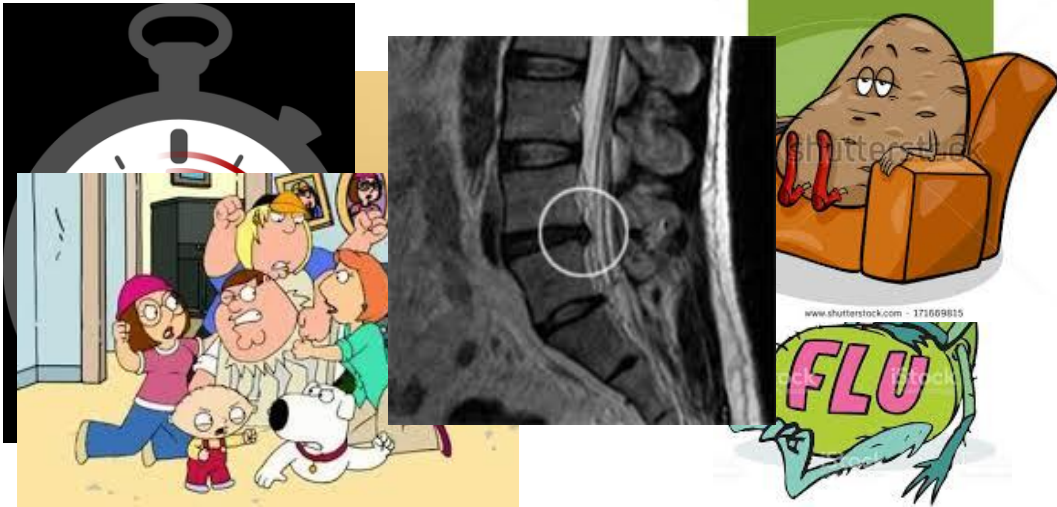


Disc protrusion in asymptomatic population





WHAT'S GOING ON HERE?



How do we manage our case?

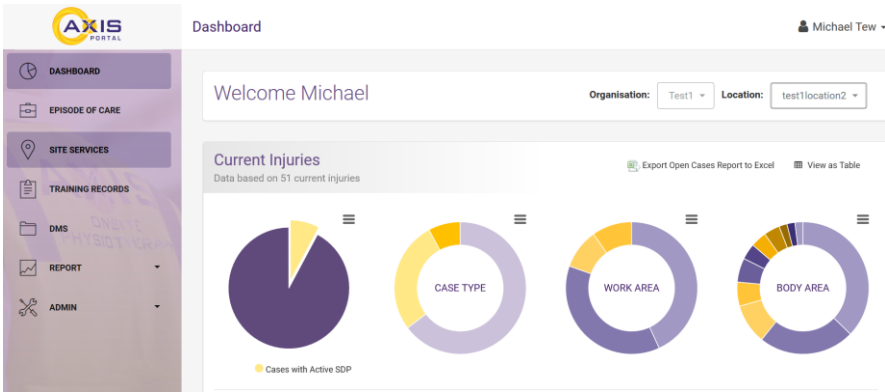


How Effective Are We?



Axis Portal

- De-identified statistical data compiled on each condition treated.



TIME TAKEN TO ASSESS NEW ACUTE AND ACUTE ON CHRONIC CASES
01.09.2017 - 30.09.2017

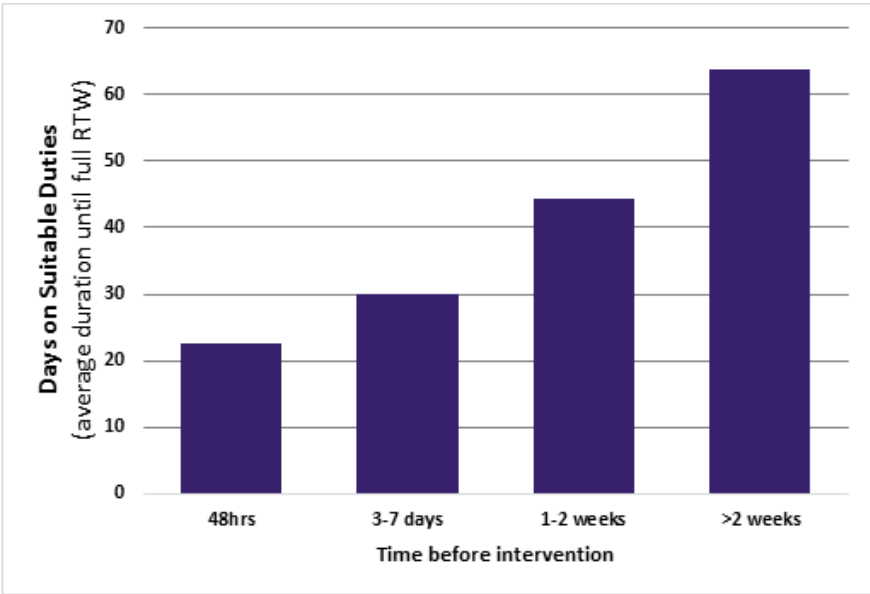
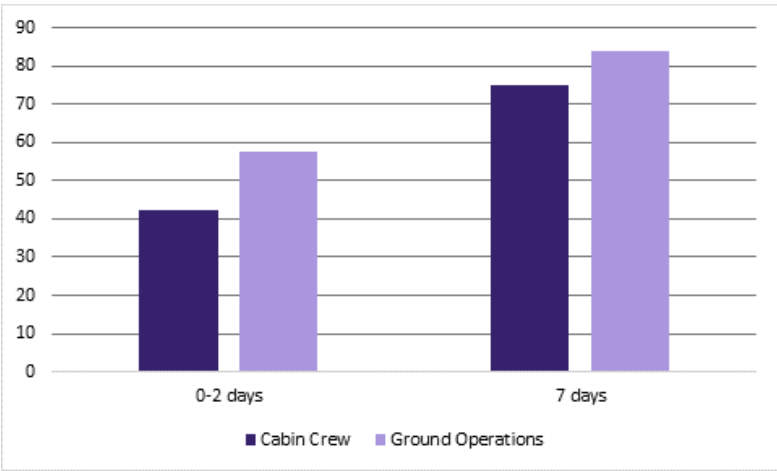


Case Type	0-2 days	3-7 days	1-2 wks	>2 wks
WR	3	3	2	0
WC	0	0	0	0
NWR	4	0	1	0
Total	7	3	3	0





Challenges of Early Intervention





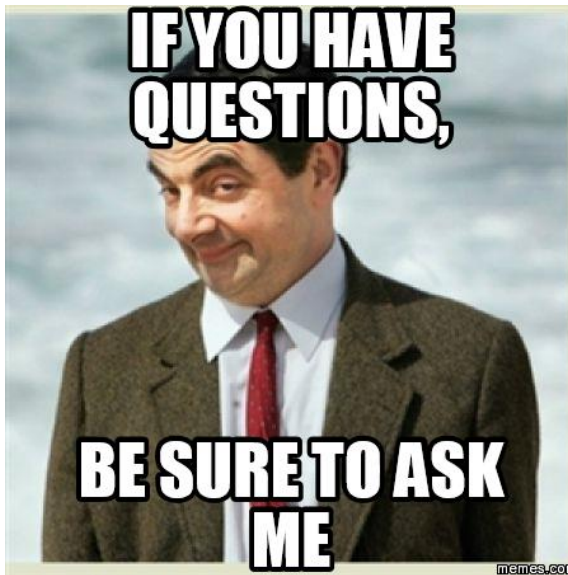
What Does Early Care Look Like?

- Show immediate care and support
- Avoid unhelpful messages
- Get early medical management from a GOOD health professional
 - Onsite Physiotherapist
 - Occupational Health Clinic
 - Local GP with good record of communication
- Injury Notification Services
 - Larger organisations can have networks of preferred providers



Case Study

- Reduction in pain to 2/10 in one week.
- Return to gym and normal daily activities in two weeks.
- Return to flying in 10 days.
- Full return to normal duties 3 weeks.
- Discharged from Axis Onsite Physiotherapy care in four weeks.





References

- Linton, S.J., A.L. Hellsing, and D. Andersson, A controlled study of the effects of an early intervention on acute musculoskeletal pain problems. *Pain*, 1993. 54(3): p. 353-9.
- Zigenfus, G.C., et al., Effectiveness of early physical therapy in the treatment of a cute low back musculoskeletal disorders. *J Occup Environ Med*, 2000. 42(1): p. 35-9.