

Advice, devices ineffective in preventing worker back pain

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Back pain is the number one cause of worker-compensation complaints, second only to the common cold in causing lost workdays. Consequently, employers and regulators have pushed training programs to teach specific lifting methods, and some recommend or require the use of assistive devices such as hoists for hospital workers. However, a new review of the research on lifting advice and handling devices has found that they do not prevent work-related back pain.

“According to the studies we have so far, it seems that this is not effective,” said lead author Kari-Pekka Martimo, of the Finnish Institute of Occupational Health in Helsinki. He and his colleagues examined data from more than 18,000 employees in 11 studies. Some studies looked at advice or assistive devices alone and some looked at combining both, but the combinations did not prove effective either.

The review appears in the latest issue of The Cochrane Library, a publication of The Cochrane Collaboration, an international organization that evaluates medical research. Systematic reviews draw evidence-based conclusions about medical practice after considering both the content and quality of existing medical trials on a topic.

The advice and devices did not prevent back pain or reduce disability claims or sick leave.

According to Martimo, one explanation for the negative findings could be that “safer” lifting techniques do not really exist — so teaching

particular tactics would be unlikely to help. “Another possibility is that elevated risk for back pain might not be related to lifting or moving heavy objects themselves, but to other aspects of work,” he said. High stress, for example, might link jobs that require lifting to back pain, rather than the lifting itself.

Alternatively, it could be that the teaching is the problem — and that workers do not actually adopt better habits. However, the studies looked at many different training methods and did not find any to have a particular advantage. “I don’t think it’s lack of adequate teaching methods,” Martimo said. One complication of considering that there is a “correct” lifting technique that employees should adopt is that “when an employee has back pain, there’s a tendency to blame the victim because he didn’t [use the techniques or devices] correctly.”

“This study confirms that much of what is happening at the workplace is well-intentioned but probably pointless,” said Christopher Maher, associate professor of physiotherapy at the University of Sydney in Australia. “We had a pretty good idea that this was the case but this study really does confirm that we need to take a fresh look at the problem,” said Maher, who was not involved with the study.

“The frustrating thing is that government bodies and employers concentrate on things that do not work, [such as] back belts, education, lifting devices, workplace redesign and no-lift policies, and ignore the only known effective intervention — exercise,” Maher added. “We also know that exercise has health benefits beyond prevention of back pain, so you are getting two health benefits (or more) for the price of one.”

Martino concluded, “We need more studies and evidence on the chain of events between certain jobs and an elevated risk of back pain. We do not know enough about that chain yet.”

Source: Center for the Advancement of Health

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