Older workers with pain: how do they stay at work? And what impact could it have on your practice.

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Aim: Explore factors that contribute to workers age 55 and older staying at work with chronic musculoskeletal pain.

Background:
(Demers et al., 2011)
- Workers from baby boom generation reach retirement age: not enough younger workers to compensate.
- Over 60% of workers in Québec have some musculoskeletal pain.
- Many will consult a physiotherapist for their pain.

Chronic pain prevalence:
(Vézina et al., 2011)
- General: 18-20%
- At work: 28.6%
- 19% of workers age 55+ have musk pain, often/all the time, work associated.
- 80% of them stay at work.
**Methods**

*(Miles, Huberman, Saldana, 2014)*

**Data collection and analysis**
- semi-structured interviews
- interview guide from conceptual framework
- guide pre-tested
- interview synthesis validated with participants
- mixed coding grid

**Results**

**Sample description** (n = 14)

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>sex</strong></td>
<td>6 women, 8 men</td>
</tr>
<tr>
<td><strong>age</strong></td>
<td>55 – 70, mean 59, median 59</td>
</tr>
<tr>
<td><strong>company size</strong></td>
<td>7 under 500, 7 over 500</td>
</tr>
<tr>
<td><strong>type of work</strong></td>
<td>7 manual, 7 mixed</td>
</tr>
<tr>
<td><strong>unionized</strong></td>
<td>8 yes, 6 no</td>
</tr>
<tr>
<td><strong>sector</strong></td>
<td>6 public, 8 private</td>
</tr>
<tr>
<td><strong>pain duration</strong></td>
<td>2 – 45 yrs, mean 14, median 7</td>
</tr>
</tbody>
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**Pain description** (n=14)

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<tr>
<td><strong>present</strong></td>
<td>3 sites or more: 6</td>
</tr>
<tr>
<td></td>
<td>intensity ≥ 6/10: 5</td>
</tr>
<tr>
<td><strong>over last year</strong></td>
<td>lumbar: 11, knees: 9, upper limb: 7</td>
</tr>
<tr>
<td><strong>duration</strong></td>
<td>over 10 years: 5</td>
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Results

Why?
- work values/functions
  - usefulness/meaning
  - social relations
  - pride
- work representation
  - work=health
  - distraction from pain

financial/family situation
- lack of retirement funds
- single breadwinner

How?
- coping
  - consulting
  - active pain management
  - medication
  - reducing activities
  - changing priorities
- work demand reduction strategies
  - schedule adjustments
  - task modulation
  - asking for/using tools/equipment

cost of staying at work

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<td>n=4</td>
<td>n=5</td>
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4/5: public mixed demands
gradual onset
intermittent pain

3/4: private sector
physical demands
sudden onset
intermittent pain
off-work activities adaptation

4/5: private sector
gradual onset
medication
health professionals
off-work activities reduction

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Discussion / impact

Why stay at work with pain?
- Not so much for financial reasons
- Meaning of work
- «Work is good for my health»

How?
- Personal factors
- Organisational factors

At what cost?
- high
- moderate
- light

What impact on your practice?
- *Exploratory study*
  - Workers in the high cost group (private sector, take medication regularly, reduced ++ off-work activities) **may be at risk** of absence.
  - Explore if **organisational changes** are possible (schedule, task content, tools and equipment) and contact employer if necessary.
  - Explore personal strategies to cope with pain.
  - Remember: most workers with pain do stay at work

Physiotherapists have a role in helping older workers staying at work