



**Service Priorities and Programmes**  
**Electronic Presentations**

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**Maximize rehabilitation outcome and economize work load for a difficult medical-social problem: Multidisciplinary Orthopaedics Occupational Rehabilitation( OTOR) Program for Work Related Spinal Problems**

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**Introduction**

Many patients with work-related spine problem (IOD/spine) cannot work or fulfill family role, had chronic symptoms, psychosocial distress and heavy demand on medical services. A team (OTOR) of physiotherapists and occupational therapists led by orthopaedic specialist was established in 2005 to provide structural out-patient rehabilitation to them.

**Objectives**

Establish effectiveness and efficacy of a structural multi-disciplinary work rehabilitation program

**Methodology**

IOD/Spine patients not resumed work within 6 weeks were assessed at OTOR clinic <8 weeks of referral. They received physiotherapy (8+/-8 weeks) and occupational therapy (11+/-4 weeks) according to their needs in physical training, mindset preparation and work hardening. The return-to-work rate and treatment duration were measured.

**Result**

Results: From 2008 to 2010, 339 patients were studied. 29 (8.6%) patients required no physical training. They were referred to medical-assessment-board (MAB) 101 days from injury; 72% resumed previous job; 10% changed job and 18% cannot work. 85 (25%) patients required physiotherapy only ( 12 sessions). They were referred to MAB 214 days from injury. 71% resumed previous job, 22% changed job; 7% cannot work. 225 (66.4%) patients had bigger barrier in rehabilitation and required both physiotherapy (17.2 sessions) and occupational therapy (16.2 sessions). They were

referred to MAB 281 days from injury. 46% resumed previous job; 29% changed job and 25% cannot work. 30 patients required surgical intervention. Discussion Patients who required no training or physical training only resumed previous job in comparable probability but with physical training, more patients can continue to work (7% c.f. 18% failure to resume work). For patients requiring structural physical and work rehabilitation, 75% can resume work productivity. This rate is much higher compared to a historical group in 2005 who had no structural rehabilitation (41 patients; 49% resume work and yet consumed 24 physiotherapy and 23 occupational therapy sessions). The duration from injury to MAB was also 70 days shorter. Conclusion: OTOR program is effective. More IOD/spine patients resume work earlier. Patients were prevented from developing sick role. Health care resources required were reduced and well spent.