Back to work: predictors of return to work among patients with back disorders certified as sick: a two-year follow-up study.

https://arctichealth.org/en/permalink/ahliterature71306

Author: Harald Reiso
Jan F Nygård
Gudrun S Jørgensen
Rune Holanger
Dag Soldal
Dag Bruusgaard

Author Affiliation: Department of General Practice and Community Medicine, the Section for Occupational Health and Social Insurance Medicine, University of Oslo, Norway. harald.reiso@samfunnsmed.uio.no

Source: Spine. 2003 Jul 1;28(13):1468-73; discussion 1473-4

Date: Jul-1-2003

Language: English

Publication Type: Article

Keywords: Adult
Back Pain - epidemiology - rehabilitation
Employment - statistics & numerical data
Female
Follow-Up Studies
Health status
Humans
Male
Middle Aged
Norway
Outpatients - statistics & numerical data
Predictive value of tests
Proportional Hazards Models
Questionnaires
Reproducibility of Results
Research Support, Non-U.S. Gov’t
Sick Leave - statistics & numerical data
Time
Work Capacity Evaluation
Abstract: STUDY DESIGN: A 2-year follow-up study of patients with back disorders certified as sick. OBJECTIVES: To identify predictors of return to work. SUMMARY OF BACKGROUND DATA: Back disorders are common health problems and the most important disorders associated with absence from work in the welfare states. Predictors of future absence may be of help in allocating rehabilitation efforts to such patients. Possible predictors include demographic and medical factors, the patients' functional status, and former absence. METHODS: For this study, 190 patients certified as sick who attended a back disorder outpatient clinic from September 1997 to December 1998 answered a questionnaire. Demographic data, medical factors, self-assessed function, and absence data were recorded. Return to work, defined as returning to work for at least 60 consecutive calendar days, was used in Cox regression analyses. RESULTS: According to multiple Cox regression analyses, age of 40 to 49 years (HR, 0.52; 95% confidence interval [95%CI], 0.29-0.94), high pain intensity (HR, 0.30; 95%CI, 0.17-0.55), low self-assessed work ability (HR, 0.43; 95%CI, 0.25-0.73), and a self-predicted absence status of not returning to work (HR, 0.31; 95%CI, 0.17-0.54) predicted longer time until return to work. Back disorders with radiation predicted shorter time until return to work (HR, 2.08; 95%CI, 1.37-3.16). The COOP/WONCA chart's physical fitness, daily activities, overall health, and change in health were associated with time until return to work in univariate analyses only, as was the duration of the sickness certification episodes from start to inclusion and the degree of sickness certification at inclusion. CONCLUSIONS: Information about the age of the patients, diagnoses, pain intensity, self-assessed work ability, and self-predicted absence status may be used as predictors of time until return to work in patients with back disorders certified as sick who attend a back disorder outpatient clinic.

PubMed ID: 12838108 View in PubMed