



Lifestyle & Prevention

Optimising work participation after injury or illness

...what is the role of physiotherapists?

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Physiotherapists have an important role in screening for risk factors associated with delayed RTW, including injury type, injury history, extended work absence, comorbidities, and adverse psychosocial factors. They are advised to perform an examination of psychosocial factors using reliable and valid tools to identify fear avoidance, psychosocial risk, or readiness for change as a basis for management.

Workers with low risk of delayed RTW should be managed using clinic-based task-specific exercises and work-focused rehabilitation, while those at high risk should be managed with a combination of clinic- and worksite-based interventions. These are the strongest recommendations from a clinical practice guideline (CPG) on the role of physiotherapists in promoting return to work (RTW) after injury or illness, which was published in the *Journal of Sports and Orthopaedic Physical Therapy*.

This CPG was developed by the Academy of Orthopedic Physical Therapy and the American Physical Therapy Association in order to create CPGs for physiotherapy management and role in the RTW process of people with health-related impairments, limitations, or restrictions as described in the International Classification of Functioning, Disability, and Health (ICF).

It aims to provide a systematic review of the available evidence regarding the role of physiotherapists in RTW after injury or illness.

The outcomes of this CPG are meant to inform policy-makers; identify the best RTW outcome measures, practices, and risk factors; and provide information for insurance payers.

The selected studies were classified into 5 levels of evidence (I-V) and the recommendations originating from these studies were graded from A (strong evidence, a preponderance of level I and/ or level II studies supporting the recommendation with at least 1 level I study) to F (expert opinion, best practice based on the clinical experience of the guideline development team).

In addition to the A-level recommendations listed above, this CPG found moderate evidence for aspects such as development of a therapeutic alliance, assessing socioeconomic aspects and work environment, using self-reported and physical performance measures, graded/modified work, ergonomic consultations, and graded exercise.

These recommendations are expected to not only decrease healthcare costs, but also to improve participation, self-efficacy, and productivity. Nevertheless, the authors stress that there is still a need for high-quality diagnostic studies, prospective studies, RCTs, or systematic reviews about the clinical course of RTW following injury or illness.

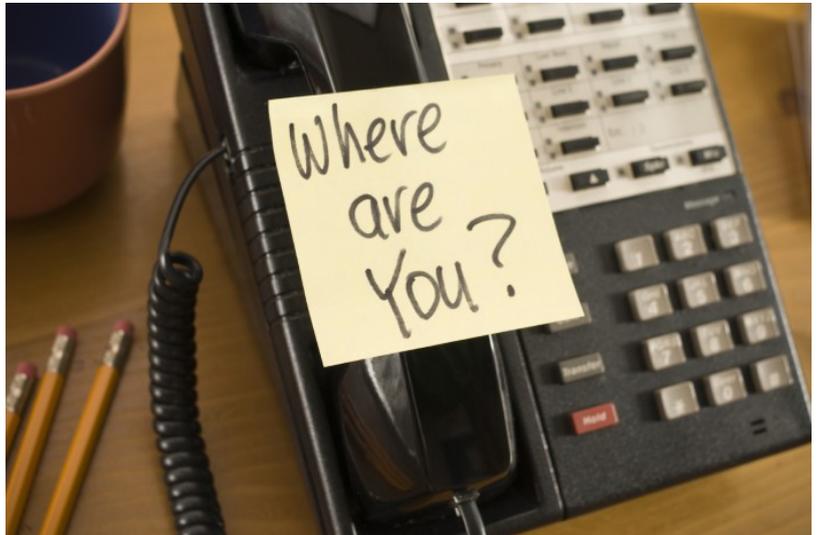
Want to read the full guideline? It's available online for free – you can find it [here!](#)

Expert opinion

Absence from work due to injuries and illnesses has a massive burden on the lives of workers worldwide, not only in terms of their psychological well-being but also in terms of maintaining their livelihood and a dignifying standard of living.

Physiotherapists have a crucial role to play in this process, which has been chronically underexplored in most parts of the world. It has been continuously shown that physiotherapy is a cost-effective intervention for many conditions leading to prolonged periods of absence from work.

Promoting physiotherapy in the RTW process benefits most importantly people recovering from injury or illness, allowing them to feel self-efficient and increasing their participation (with the subsequent effects on well-being and quality of life), but also employers who benefit from increased productivity and less work-related expenses in terms of insurance claims.



Naturally, this is a thorough and complex document which is hard both to summarise in a few paragraphs or to read in one go. However, it is available for free in its entirety, and should be a major source of reference considering the amount of patients being seen for conditions leading to work absence.

> From: Daley et al., *J Orthop Sport Phys Ther* 51 (2021) CPG1-CPG102. All rights reserved to *Journal of Orthopaedic & Sports Physical Therapy*. [Click here for the online summary](#).



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