



BACK-UP from AVIVA

Your Guide to Back and Neck Health





Mr Marcus Timlin

Marcus Timlin, MB BCH BAO LRCP & SI MRCS MCh FRCSI (Tr & Orth) is a consultant orthopaedic surgeon specialising in the spine. Marcus graduated from RCSI Medical School in 1995 before qualifying as an orthopaedic surgeon. He obtained a combined orthopaedic and neurosurgical fellowship in complex spine surgery in Canada. Marcus practices in the Mater Private Hospital and the Beacon Clinic in Dublin. He has a special interest in the surgical treatment of degenerative conditions of the spine.



Dr Naoimh Kenny

Dr Naoimh Kenny, GP, is a general practitioner working in Dublin. She has extensive experience across the medical spectrum and understands the role of the GP in primary care and the referral process. She has a professional insight into the importance of involving your GP in your follow-up treatment and in the ongoing management of your medical condition and records.



Dr Nick Kendall

Dr Nick Kendall, PhD, DipClinPsych, MNZCCP, trained as a clinical psychologist and has a PhD in chronic pain management. He established cognitive-behavioural pain management programmes including innovative return-to-work methods, and served as clinical director of a large, multidisciplinary pain management service in New Zealand. He has lectured in Orthopaedic Surgery & Musculoskeletal Medicine at the University of Otago, New Zealand, and he has served as president of the New Zealand Pain Society, and on the editorial board of the journal "Pain". For the past three years, he has worked as an independent health services consultant in London.



Gillian Walker

Gillian Walker, MISCIP, board member of ISCP, trained in the Physiotherapy School of Trinity College Dublin. She is the founder of the Court Clinic and has many years experience in musculoskeletal therapy. Having worked extensively in the field of sports medicine with the FAI, Irish Swimming and the Olympic Council, Gillian has a specific interest in lower limb biomechanics, rehabilitation and orthotic prescription.



Margaret Hanlon

Margaret Hanlon, MSC MISCIP, Vice President ISCP is a founding partner of CityPhysio. She qualified from Trinity College Dublin with a BSc. (Hons) in Physiotherapy in 1991. She subsequently attended University College London, gaining a Master's degree in physiotherapy, specialising in Exercise and Manipulative Therapy. Margaret specialises in the treatment of back pain and she lectures MA students in UCD on back pain.

For Aviva: Kate Candon

Published by: Zahra Media Group

For information about this service, please contact custom@zahrapublishing.com

Publisher: Gina Miltiadou

Editor: Mary Connaughton

Design: Siobhán McNabb

Images: Getty Images, Shutterstock

Special thanks to: Our members

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Welcome to Back-Up, your Aviva guide to a healthy back and neck.

Most of us don't think very much about our back or neck until there is a problem - but the fact is, your back is one of the most important parts of your body - it supports most of your weight and helps you to get on with your everyday life. Back and neck pain or injury can impact on our wellbeing and lifestyle. However, with the proper advice from clinical specialists you can prevent, dramatically improve or correct most instances of back and neck pain in the early stages.

Back-Up is exclusive to Aviva Health members. It is an innovative service that's designed to be your first port of call if you start experiencing back or neck pain. As an Aviva Health member, you can now access Back-Up as soon as a back or neck problem develops.

Provided in association with HCML, a leading independent specialist rehabilitation organisation and the Irish Society of Chartered Physiotherapists, Back-Up is dedicated to offering a complete, evidence-based rehabilitation service, endorsed by expert clinicians. The service focuses on ensuring that people with back or neck pain get the most clinically-appropriate treatment at the right time.

This guide will give you an excellent overview of how to maintain the health of your back and neck through simple measures that can easily be incorporated into your daily life at home and at work. Our expert panel discusses the role of clinicians including GPs, surgeons, physiotherapists, psychologists and case managers in the treatment of back pain and injury. We also examine the importance of involving your GP in your ongoing care. A leading orthopaedic surgeon advises about when surgery may be considered and ways of optimising your post-operative recovery.

We hope that this book gives you a practical and positive guide to back and neck health.

Mary B. O'Connor, *RGN Dip MS*
Aviva Health Provider Affairs Specialist



AVIVA

The Irish Society of Chartered Physiotherapists is delighted to be involved in Aviva Back-Up, which is about tackling back pain head on. Getting the right advice and treatment from the start will lead to a speedy recovery and prevent a chronic problem from developing. Chartered physiotherapists are movement experts. They will enable you to get better and stay better!

The title "Chartered Physiotherapist" and the initials MISCP indicate that a physiotherapist is a member of the professional regulating body, the Irish Society of Chartered Physiotherapists (ISCP). Membership of the Society is granted to graduates of accredited university physiotherapy degrees that incorporate significant hospital-based training.

The ISCP is the only professional body in Ireland recognised by the World Confederation for Physical Therapy (WCPT). Evidence of Continuing Professional Development is mandatory for all ISCP members with emphasis on evidence-based practice.

Margaret Hanlon, *MSc MISCP, Vice President ISCP*
and Gillian Walker, *MSc MISCP*




Health & Case Management Ltd (HCML) is a leading independent provider of professional rehabilitation and clinical case management in the treatment of all types of injury, from back and neck injuries through to life-changing injuries. HCML is passionate about ensuring that everyone who requires rehabilitation has access to quality and effective, co-ordinated treatment.

Being patient centric, HCML provides the support and empowerment for you to take control of your recovery. You will be supported by our team of professional, qualified clinicians, which includes nurses, physiotherapists, neurologists, occupational therapists and psychologists, who will help you achieve your rehabilitation goals.

HCML uses a stepped care approach that addresses physical impairments whilst empowering an individual's active involvement in their own treatment and recovery.

Keith Bushnell, CEO
HCML





BACK OR NECK PAIN WILL AFFECT MANY OF US AT SOME POINT, BUT IF TACKLED EARLY AND MANAGED CORRECTLY, THE MAJORITY OF PEOPLE CAN MAKE A FULL AND FAST RECOVERY

INTRODUCTION TO AVIVA BACK-UP

Your guide to neck and back health

Welcome to Aviva Back-Up, a unique new service for Aviva Health members. As an Aviva Health member we know that you take a proactive approach to your health in terms of preventing illness where possible and wanting to achieve the best recovery possible from any health issue you experience.

Back or neck pain will affect many of us at some point, but if tackled early and managed correctly, most people make a full and fast recovery and get back to enjoying every aspect of their lives. To support you in this, Aviva have brought together a panel of clinical experts to create Back-Up, an innovative case management service providing advice on prevention, treatment and rehabilitation for neck and back pain.

How Aviva Back-Up Works

If you experience any back or neck pain take the following steps to get Back-Up:

Step 1

Call Aviva Back-Up on 1890 717 717.

Step 2

An Aviva customer care agent will establish that you are an Aviva Health member, ask a couple of questions and book a triage assessment with your dedicated clinical case manager at a time that is convenient for you.

Step 3

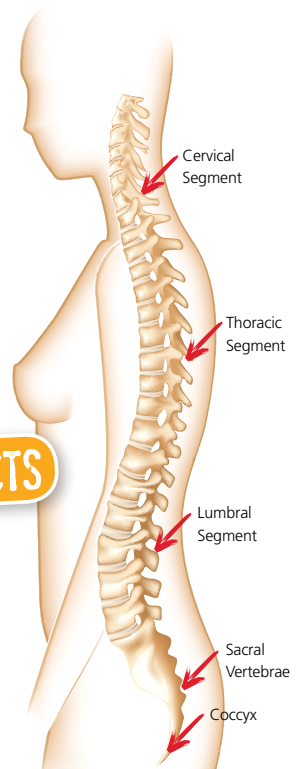
Your Back-Up clinical case manager will assess your injury and advise a personalised treatment plan to help you to feel great again.

The Aviva Back-Up service is designed to provide tailored treatment and rehabilitation programmes through a combination of physiotherapist visits and self-help exercises as required. You will be assigned a dedicated clinical case manager who will monitor your progress throughout the programme with the aim of reducing pain or discomfort and getting you back to normal as quickly as possible. So if you experience any back or neck pain, don't worry, the Aviva Back-Up team is just a phone call away. Aviva Back-Up; helping to get you back on your feet.

Aviva Back-Up
Call 1890 717 717
8am-8pm
Monday to Friday



MOST BACK AND NECK PAIN WILL RESOLVE WITH MINIMAL TREATMENT BY YOUR GP OR CHARTERED PHYSIOTHERAPIST



YOUR BACK & NECK



Movement is central to our lives and anything that impacts on our ability to move freely and without pain can have a debilitating effect on our quality of life. Back or neck pain will affect most of us at some point but it can be improved with exercise and treatment. Aviva Back-Up works with chartered physiotherapists to ensure that you get professional advice and care when you need it. Here we look at the structure of the spine and find out the key facts from chartered physiotherapist and vice president of the ISCP, **Margaret Hanlon**.

THE FACTS

The spine

The human spine is made up of bones called vertebrae that are separated by discs of cartilage, which act as shock absorbers. It is divided into three main sections; the Cervical, top seven vertebrae; Thoracic, middle 12 vertebrae and Lumbar, bottom 5 vertebrae. A channel containing the spinal nerves runs through the centre of the vertebrae.

FACT

Most back and neck pain is caused by muscle or joint strain or ligamentous damage. Muscle spasm, secondary to soft tissue injury, can cause back and neck pain. These injuries are usually the result of poor technique while lifting or carrying, overreaching or because of poor posture, leading to muscle weakness and altered movement patterns.



FACT

Chronic headaches are sometimes related to neck problems.

The neck, at times, can give rise to headaches. This type of headache responds well to physiotherapy involving manual therapy and exercise.

FACT

Smoking impairs your ability to recover. People who smoke take longer to heal and recover from injury.



FACT

Osteoporosis can lead to loss of bone density in the spine.

It's important to have a good intake of calcium in your diet, particularly for women, to prevent osteoporosis in later life, which can cause damage to vertebrae.



FACT

Aging will not always result in back or neck pain. Degenerative changes in the neck and back are commonly observed on x-ray. They are a relatively normal occurrence as part of the ageing process. There is no evidence that they are a risk factor for pain.



FACT

Maintaining a healthy weight reduces the chance of back and neck pain. A healthy body weight and good level of fitness helps to prevent back and neck pain. Carrying excess weight can put undue strain on your joints, back and neck. Conversely, being underweight can lead to bone loss and damage to vertebrae.



FACT

Most people will experience some back or neck pain in their lifetime.

99% of the time, it is not serious. However, if you have had an injury or have pain going down your arm or leg, you should seek advice from your doctor or physiotherapist.



IF YOU ARE UNSURE ABOUT YOUR POSTURE, A CHARTERED PHYSIOTHERAPIST WILL BE ABLE TO ADVISE YOU ON HOW TO CORRECT IT

Sitting

- Avoid sitting for prolonged periods
- Get up and move around
- Sit right back into the chair
- Sit with your lower back well supported

LOOKING AFTER YOUR BACK & NECK



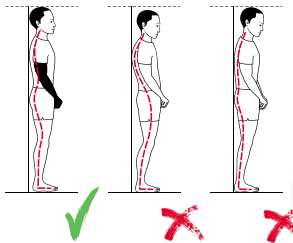
Prevention is definitely better than cure, but knowing how to look after your back and neck will help prevent pain, help you recover from injury and stay pain-free. Aviva Back-Up expert, chartered physiotherapist, **Margaret Hanlon**, discusses the principles of self-care that can help you avoid back and neck pain in your daily activities.

Work and Back and Neck Pain: The Facts

The more active you remain, the faster you will recover from back and neck pain. Although it may be difficult to begin, keep moving and gradually increase your activity levels each day. It is not necessary to be completely symptom free before you return to work. In fact, many people with back and neck pain find it easier to manage and that it resolves more quickly if they keep as much of their normal routine as possible.

Healthy Posture

Poor posture places undue strain on your spine and contributes to the development of muscle imbalances. These imbalances affect the way we move and protect our back and neck. When you stand, you should feel like your weight is falling down through the middle of your feet; not down through your heels or toes. If you are unsure about your posture, a chartered physiotherapist will be able to advise you on how to correct it. To improve your posture and become back and neck aware, try the following tips:



Standing

- Think tall!
- Chest lifted
- Shoulders relaxed
- Head in line with body
- Hips in line with feet





LOOKING AFTER YOUR BACK AND NECK SHOULD BE SECOND NATURE WHEN DOING EVERYDAY ACTIVITIES



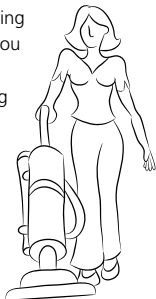
Carrying a bag

- Avoid carrying heavy loads if possible
- Carry things close to your body
- Spread loads between both hands
- Support shoulder bags from beneath
- Carry a rucksack on both shoulders

Daily activities and hobbies

Applying a few simple precautions when doing ordinary tasks or activities will protect the health of your back and neck.

- Take regular short breaks from forceful or repetitive work
- Keep your arms low
- If working overhead, use a step ladder so that you are level with the job at hand
- Avoid looking up for a prolonged period
- Avoid over-reaching
- Keep the items you need close by
- When vacuuming or sweeping, bend from your hips not your back.
- Move your feet to avoid over-reaching



Exercise and Back and Neck Pain: The Facts

Often, we respond to back and neck pain by reducing our activity, stopping exercise or even staying in bed. However, while a short period of rest may be beneficial, anything longer than a couple of days can be detrimental to your recovery. Correcting movement problems will set you on the road to recovery. Your physiotherapist will devise a programme of exercise based on your diagnosis, help you to perform the exercises correctly and monitor your recovery progress. Under the supervision of your physiotherapist you can begin a routine of individually-tailored exercises and stretches that will:

- reduce your symptoms
- improve your mobility
- strengthen your back and neck
- promote healing
- prevent further episodes of back and neck pain.



MANY

of us will experience neck pain. It's usually muscular and can be simply treated with a hot or cold pack. It should improve within a couple of days.



Sleeping

A good night's sleep is essential for our health but if you find you are waking up with a stiff neck or sore back, it could be related to your sleeping position or pillow. Your head needs to be properly supported by a pillow that is thick enough to support your spine in a neutral position. It should fill the depth from your ear to shoulder without pushing your head up or letting it drop down.

- Avoid sleeping on your stomach
- Find the best pillow for you
- Ensure your neck is properly supported
- Choose a good quality mattress

Medication and Back and Neck Pain: The Facts

There are many over-the-counter pain relief medications available for the short-term treatment of back and neck pain. Your GP may prescribe other medication, depending on the diagnosis they reach. While medication will provide relief from the symptoms of back and neck pain, it will not address the underlying condition or lifestyle factors so it is important to address these with your GP or physiotherapist.

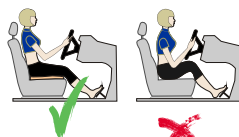
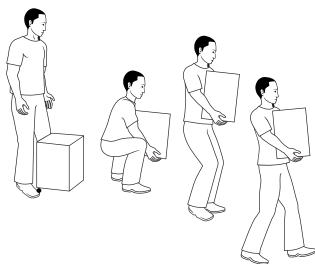


Desk work

- Have your work-station assessed using resources in HR if they are available
- Your shoulders, back and neck should be comfortable
- Don't look down for too long
- Keep the mouse close and avoid over-reaching
- If you frequently use a phone throughout the day, consider a headset
- Avoid cupping the phone between your ear and shoulder
- Get up and stretch regularly

Lifting

- Assess the weight of the load
- Get help if needed
- Keep the weight close to your body
- Bend your knees and keep your trunk straight
- Lift using a smooth movement



Driving

We spend more and more time in the car, often in traffic, where we tend to slouch or lean to one side by resting our elbow on the window or our hand on the gearstick. The following tips will ensure

you have better posture while driving.

- Avoid slouching
- Sit right back into the seat
- Adjust your seat so that you can comfortably reach the controls
- Make sure the back of your seat is upright
- Don't lean your trunk to one side
- Take regular breaks if driving for long periods

HEALTH, WORK & HAPPINESS



Many of us will suffer back or neck pain, but there is usually no lasting damage and most of us remain at work, or return to work quite quickly. For others, the myths surrounding back and neck pain can become an obstacle to their recovery and their return to work. Clinical psychologist, **Dr Nick Kendall**, explains the importance and benefits of taking a proactive approach.

Work is an important part of our lives; it is good for our physical and mental health. In fact, returning to work actually helps recovery and is the best way to avoid long-term sickness. Your Aviva Back-Up clinical case manager and this book can help you identify and overcome obstacles that you might face during your recovery.

Getting back to work

Look at it this way; you can be an 'avoider' or a 'coper'; if you want to

recover, being a copier will enable you to make better progress. Let those who are helping you know that what you really want is help to get on with your life. Talk to your employer about any obstacles you see, and how you can resolve them together.

Getting active will help you feel more positive and happy as you will see what you can do. As you get fitter, things will improve. You can encourage everyone to work together to help you get on with your life.



YOUR RETURN-TO-WORK PLAN

- 1. Take control:** Make the best use of any available help.
- 2. Set realistic goals:** Set a clear time-line and goals to help you stay on track. Aim for weeks rather than months.
- 3. List what you can do:** Think positive. List the obstacles to your recovery; then list ways that your doctor, physiotherapist and employer can help you overcome these obstacles.
- 4. Talk to your doctor:** Discuss what work you can do.
- 5. Increase your activity:** Do a little more, a little longer, every day. Pace yourself and don't give up!
- 6. Talk to your physiotherapist:** Ask for treatment designed to help you carry out your daily activities.
- 7. Change your mind-set:** Focus on the milestones you achieve during your recovery, this will help you avoid any anxiety about getting active and returning to work.

Overcoming obstacles

Think about and list any obstacles that are impeding your recovery. Work out how you can get past these on your own or with support.

Health and happiness

Good health is central to our happiness. Working on your recovery is a positive step to resuming a normal life. It helps achieve independence in your daily activities and lets you enjoy the things that make you happy.

MYTH Common health problems are caused by work. *Usually, they're not!*

- Everyone gets these kinds of problems,
- Work may make symptoms feel worse at times, but that does not mean work caused the problem.

MYTH Working will make my health condition worse.

Most people with common health problems:

- Stay at work and come to no harm,
- Feel better sooner.

MYTH You should not return to work until you are 100% OK. *Actually, you should – and the earlier, the better!*

- Work is often part of the treatment and recovery process,
- Small changes to your job may help.

MYTH A sick certificate means that you **MUST NOT** work

- It just means that you met the criteria for sick pay or benefits,
- You can arrange to get back to work at any time in consultation with your health professional.

Aviva's Employee Assistance Programme (EAP) Telephone 1850 171 888. Please refer to your table of cover.

This is a fully confidential independent support and counselling service to company employees 24 hours a day, 365 days a year. The service is designed to offer help, advice and support on a range of personal, financial and work related issues over the phone or through face to face counselling sessions. The confidential freephone EAP line is staffed by qualified counsellors and is open 24/7 & offers support for a wide range of issues, including but not limited to: health problems, stress, family issues, depression, anxiety, childcare, relationship issues, consumer issues, caring for elderly relatives, legal issues, addiction, social welfare entitlements, eating disorders and financial concerns.



PHYSIOTHERAPY AND YOU



If you have neck or back pain, your Aviva Back-Up clinical case manager or GP may refer you to a chartered physiotherapist for further treatment. They will use a combination of gentle manipulation and exercises to help your muscles and joints to work properly, repair damage, reduce pain or help your recovery after surgery. **Gillian**

Walker, chartered physiotherapist and board member of the ISCP, explains what to expect from a physiotherapy session.

What will happen in treatment?

Firstly, your chartered physiotherapist will assess you to diagnose your condition and help you understand what's causing the problem. Your physiotherapist will then work with you to develop a treatment plan based on your lifestyle and general health. This will include advice on how you can help yourself with exercises between treatments and on how you can prevent a recurrence of your problem. Your progress will be evaluated throughout your treatment and modified as necessary.

The aim of treatment is to reduce pain, increase mobility and correct movement and postural

faults. It can help you to recover from an accident or surgery, so that you can have the physical independence to carry out your job and enjoy your life.

Your chartered physiotherapist,

or your clinical case manager if you are using Aviva Back-Up, will send a report of your treatment and progress to your GP, which can be added to your medical records.

✓ CHECKLIST

This checklist of questions can help you get the most out of your appointment with your doctor or chartered physiotherapist:

- What's causing my back or neck pain?
- Is there anything I can do to stop it getting worse?
- What are the treatment options?
- What exercises will help?
- How often should I do these exercises?
- Are there any lifestyle changes I can make to prevent it happening again?

Depending on your diagnosis, treatment may include:

- Manipulation of your joints
- Mobilisation of soft tissues
- Exercise
- Postural correction
- Ergonomic advice
- Advice on use of heat or ice
- Relaxation and breathing techniques
- Hydrotherapy



MAINTAINING A GOOD EXERCISE REGIME CAN PREVENT BACK AND NECK PAIN RECURRING.

CHRONIC PAIN - SEPARATING FACT FROM FICTION

There are many misconceptions about back and neck pain, which can actually prevent people from taking the correct action to reduce their pain and make a full, speedy recovery. Back-Up expert, **Gillian Walker**, uses the ISCP guidelines to debunk some of these myths.

I hurt my back, so I will probably have bad back pain from now on.

While back pain can be very uncomfortable, most people make a very good and speedy recovery.

I have back pain, so I should stay in bed and rest.

In the first few days after the initial injury, avoiding aggravating activities may help to relieve pain. However, there is very strong evidence that keeping active and returning to all usual activities, including work and hobbies, is important in aiding recovery.

Most

cases will resolve without surgery.

The more back or neck pain I have, the more my spine is damaged.

This may seem strange, but we now know that more pain does not always mean more damage. People with similar back and neck problems can feel very different levels of pain.

My back or neck pain is due to something being 'out of place'.

There is no evidence that lower back pain is caused by a bone or joint in your back or neck being out of place.

I need a scan or x-ray for my back or neck pain.

An x-ray or MRI scan is not normally used in the initial treatment of back or neck pain. Most treatments, such as physiotherapy, do not require either. If, however, surgery is being considered or if you have previously had surgery on your neck or back, your doctor may then request a scan or x-ray.

I can't lift things.

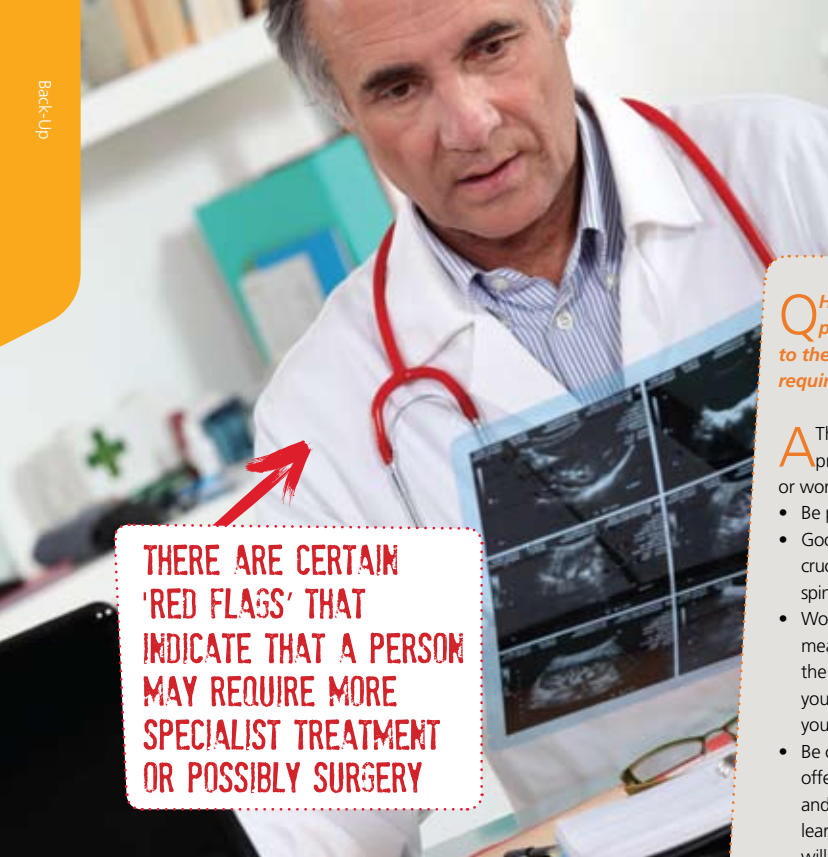
Of course you shouldn't lift anything that's too heavy for you. But knowing how to lift things properly will enable you to avoid injuring yourself. Squat close to the object with your knees bent, back straight and head up. Lift in a slow, smooth action without jerking or twisting your spine.

Exercise is bad for back or neck pain.

Regular exercise is one of the best ways of preventing back pain and plays an important role in recovering from many back and neck injuries. Under the supervision of your physiotherapist you can begin a programme of gentle exercise that gradually increases as your symptoms improve. Maintaining a good exercise regime can prevent back and neck pain recurring.

I need an operation to cure my back or neck pain.

Only a tiny proportion of people with back or neck pain require surgery. Over 90% of cases will resolve without surgery. Your medical team will only consider surgery if it is absolutely necessary.



THERE ARE CERTAIN 'RED FLAGS' THAT INDICATE THAT A PERSON MAY REQUIRE MORE SPECIALIST TREATMENT OR POSSIBLY SURGERY

Q How can back pain be prevented from progressing to the point where surgery is required?

A The important factors to help prevent back pain from occurring or worsening are:

- Be proactive about your fitness.
- Good weight management is crucial to minimise stress on your spine.
- Work on your core stability. This means improving the strength of the area of your body bound by your abdominal muscles, which are your lower back and pelvis.
- Be careful when lifting. Many jobs offer manual handling skills courses and it's worth availing of them to learn the correct techniques, which will help protect your spine.

SURGERY



Orthopaedic specialist and surgeon, **Mr Marcus Timlin**, discusses the reasons why surgery may be clinically indicated in the treatment of back and neck pain and the best ways to improve your chances of regaining maximum post-operative mobility.

and will improve quite quickly. Some strains can lead to disc injury where the disc is torn or herniated and this can cause more severe pain as the nerves in the spine can be compressed. This kind of injury can cause pain that radiates to the buttock, leg and foot.

Q How common is back pain in the general population?

A At some stage, between 80% and 90% of us will experience back or neck pain. In the majority of cases, it will resolve spontaneously or with minimal treatment. Self care, such as a short period of rest and medication like anti-inflammatories or painkillers usually helps. In cases where the pain was caused by injury, such as

a tear to a disc while lifting, you may need to avoid this particular activity in the early stages of your recovery.

Q What are the main causes of back and neck pain?

A Most cases of back pain are caused by injury from sport or strain from moving or bending in a particular way. In general, most strains or injuries are relatively minor

Q How do I know what kind of treatment I will need?

A The first point of contact for Aviva members with ongoing back or neck pain, will be their Aviva Back-Up clinical case manager, who will usually be able assess them and help them manage their own recovery with advice on self-care, medication, referral to a chartered physiotherapist or GP.

90%

of cases will resolve without surgery.

Q *When is surgery clinically indicated?*

Any of the **'Red Flags'** (see panel on right), will indicate that a patient will be referred for further investigation. If your Back-Up clinical case manager identifies any of these red flags, they will refer you to your GP who will examine you and refer you for tests or to a specialist for further treatment. The patient will usually have an MRI scan to establish the cause of the pain. Based on what the scan shows, we will plan treatment accordingly. This may, in some cases, include surgery.

Q *What treatment options should be considered before surgery?*

The majority of cases of back pain are what we refer to as mechanical back pain. That is, pain that is worse when we move. This type of pain is best managed with pain medication, physiotherapy and an exercise programme to improve your core stability, which will help prevent it recurring.

In more severe cases or with ongoing neck, lower back pain or leg pain lasting more than six weeks, an epidural steroid injection may be appropriate. This can provide a level of relief to allow the patient undergo physiotherapy

or perform gentle exercises and recover fully.

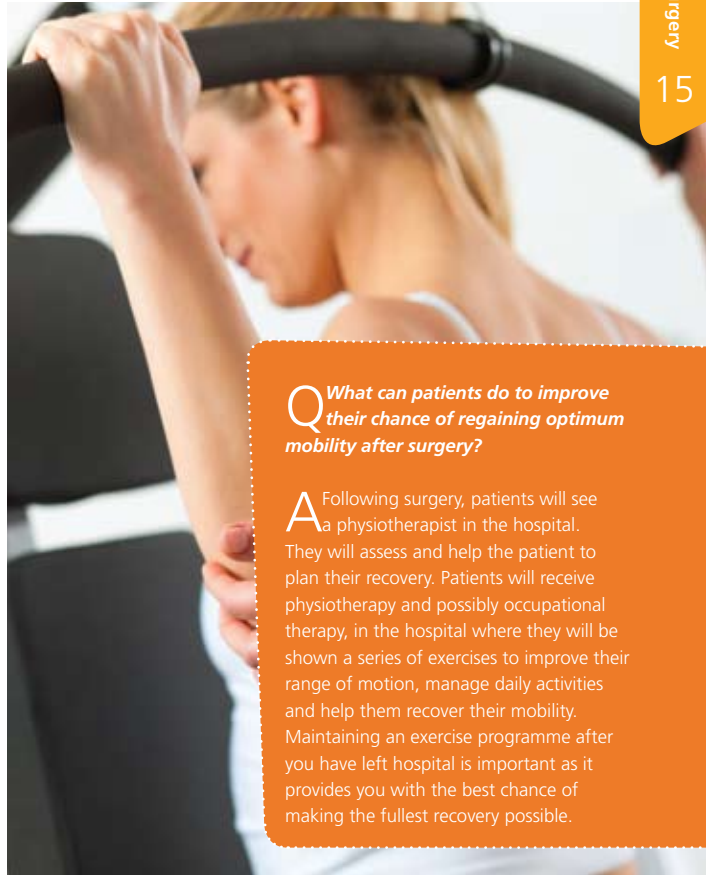
Radiculopathy (Sciatica) is relatively common. It's the irritation

and inflammation of a nerve caused by compression from a herniated disc. This can also be treated with epidural steroid injections.

Q *At what point will a patient be referred to a consultant or surgeon?*

The **'Red Flags'** that indicate that a person may require more specialist treatment or possibly surgery are:

- ✦ Non mechanical back pain or pain at night
- ✦ Unexplained weight loss or a history of malignancy
- ✦ Age under 16 or over 70
- ✦ History of significant spine trauma
- ✦ Bilateral leg weakness
- ✦ Altered sensation in the saddle area or any incontinence



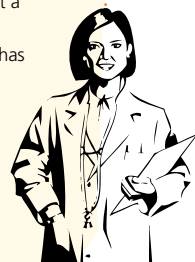
Q *What can patients do to improve their chance of regaining optimum mobility after surgery?*

Following surgery, patients will see a physiotherapist in the hospital. They will assess and help the patient to plan their recovery. Patients will receive physiotherapy and possibly occupational therapy, in the hospital where they will be shown a series of exercises to improve their range of motion, manage daily activities and help them recover their mobility. Maintaining an exercise programme after you have left hospital is important as it provides you with the best chance of making the fullest recovery possible.

YOUR GP MANAGES YOUR ONGOING CARE, PROVIDING REFERRALS TO SPECIALISTS IF NECESSARY

If your clinical assessment by your Back-Up case manager indicates that you may need to be referred to a specialist, you will visit your GP to be referred. This is to ensure continuity in your ongoing care, as:

1. Your GP will hold the most complete version of your medical records.
2. They will advise you on treatment options.
3. Any referral will be added to your medical records.
4. Your GP will supply the specialist with the relevant information.
5. Any treatment given or medication prescribed will be added to your medical records.
6. They will receive the results of any tests you undergo.
7. Your GP will get a report on how your condition has responded to treatment.
8. Your GP may be involved in any follow up treatment.



CONSULTING YOUR DOCTOR



Aviva Medical Council GP, **Dr Naoimh Kenny**, outlines the role of your GP in your Back-Up treatment programme from the point of diagnosis, through the referral system and in your ongoing case management.

Back-Up and your GP

When you consult Aviva Back-Up, you will be assigned a clinical case manager who will carry out a clinical assessment of your symptoms and plan your treatment and rehabilitation programme.

Depending on your symptoms, your clinical case manager may provide you with an exercise programme or refer you for physiotherapy. In some cases, your clinical case manager will advise

that your condition requires further investigation and will suggest that you visit your GP who can examine your back or neck and order further diagnostic tests if necessary.

Back-Up promotes the inclusion of your GP in all aspects of your care. Your clinical case manager will send your case notes and a report of any treatment you receive to your GP so that your medical records can be updated.



or tests before deciding what medication to prescribe. GPs prescribe drugs or treatment when there is knowledge of the patient's health and when they are satisfied that the drugs or treatment serve the patient's needs. GPs keep their knowledge and skills up to date and this means that they can offer a patient the best possible medical diagnosis or advice.

Referrals

If your Back-Up clinical case manager feels that you need specialist treatment, you will be directed to your GP who will carry out an examination and provide a referral to a specialist such as a consultant, surgeon or another healthcare professional. Referral involves transferring some or all of the responsibility for your care to a specialist for treatment that is

Clinical records management

As your GP is responsible for your ongoing care, they will keep a record of any health issues you experience, the treatment or medication you receive and details of how your injury or illness responds to treatment.

This information is vital in ensuring that any referrals to other medical specialists include comprehensive background information. It's also important that your medical records are kept in one place as there may be connections between different illnesses that may seem unrelated.

Your GP safeguards and protects the information contained within your medical records and ensure confidentiality of your records in line with legislation.

Medication and prescriptions

The prescribing of medication requires specialist knowledge of the drugs and of the patient's

medical history. Your GP is best placed to have a clear picture of any contraindications when prescribing medication to alleviate your symptoms. They take account of your medical history and any other prescription or over-the-counter medication you may be using or any reactions you have previously had. They may decide to request blood samples



outside your GPs area of expertise. After a patient receives treatment under referral, they will usually be referred back to their existing GP for ongoing and future care.

USEFUL CONTACTS

Aviva Back-Up

Telephone: 1890 717 717
Email: info@avivahealth.ie
Website: www.avivahealth.ie

ISPC - The Irish Society of Chartered Physiotherapists

Email: info@ispc.ie
Website: www.ispc.ie





Aviva Back-Up

Aviva Back-Up

As neck or back pain will affect many of us at some point, Aviva Health has developed a Back-Up* plan to provide our members with a prompt, personalised, clinical case management service if they are suffering with acute back or neck pain. Back-Up from Aviva encompasses clinical assessment and advice or referral for further treatment and the rehabilitation you need. Your dedicated clinical case manager will monitor your progress throughout the programme with the aim of getting you back to normal as quickly as possible. So, if you experience any back or neck pain, don't worry; the Aviva Back-Up team is just a phone call away.

How it works*:

- If you experience any back or neck pain, simply call Aviva on 1890 717 717 (8am-8pm Monday to Friday). An Aviva agent will take some initial details from you and refer your details to a dedicated clinical case manager.
- Your dedicated Aviva Back-Up clinical case manager will call you back at the most convenient time for you.
- Your clinical case manager will conduct a triage assessment and advise a personalised treatment plan to help you feel normal again.

Call 1890 717 717

Aviva Back-Up clinical case manager will call you to complete a clinical assessment

Referral to an ISCP physiotherapist if required and self-help exercises

*Terms & Conditions Apply. Aviva Back-Up is provided by Health & Case Management Limited. Physiotherapy if required will be provided by a member of the Irish Society of Chartered Physiotherapists, a one-off €50 contribution payable to the physiotherapist towards the cost of treatment will be required should the member need physiotherapy treatment. This payment is to ensure members commit fully to the Back-Up programme. €50 is payable per episode. Aviva Health Insurance Ireland Limited is regulated by the Central Bank of Ireland.



AVIVA  **hcml**

For Aviva Back-Up call 1890 717 717
8am – 8pm Monday to Friday
www.avivahealth.ie

1st Edition, April 2012