

Practice Issue

- Coggan, Norton, Roberts and Hope (as cited in Driscoll et al., 2004) found that the lifetime prevalence of back pain in nurses was 62%, the annual prevalence and point prevalence was 37%.
- Between 1995 and 2009 NZ nurses registered significantly fewer lumbar spine injuries with ACC than the general population. However, nurses did claim more costs with ACC than the general population for the same time period (Cornwall & Melloh, 2012).

Why

A literature review was carried out on this topic because:

- it is a very prevalent issue as seen from the statistics;
- the presenter, a student nurse, suffers from back pain; and
- the presenter works part-time with a client who was a nurse but suffered a back injury.

Research Question

- “Do nurses with back pain who treat it have better results on work than nurses who do not treat back pain?”

Literature

Treating back pain

- Physiotherapists (24.8%), general practitioners (16.1%) and chiropractors (13.4%) seem to be the most common choice for treatment (Branney & Newell, 2009).
- Nurses who partook in ergonomics training and Back School education had better follow-up results at six months and one year than the control group who received passive physiotherapy (Jaromi, Nemeth, Kranicz, Laczko, & Betlehem, 2012).

Not treating back pain

- “Both samples cited cost as the most important perceived barrier to accessing chiropractic” (Branney & Newell, 2009, p. 134-135).
- Three and a half percent of nurses leave their jobs because of back pain (Ryall, Jenkins, & Roberts, 2005).

Implications

- Education is proven effective at minimising back injuries so effective, relevant and consistent education needs to be provided
- Nurses can work to their full ability with unrestricted work activities if they do not have back pain.
- Working without or treating back pain means nurses can work better, longer, take less sick days and be able to enjoy leisure time.

Conclusion and Recommendations

- To summarize, back pain is a major issue in nursing and literature has shown that it is more important to treat back pain than leave it untreated. Some treatment options include the following recommendations:
 - More regular and compulsory education sessions for nurses about back pain.
 - More education given to nursing students throughout their bachelor degree.
 - Make managers aware of shortages of lifting aids.

References

- Branney, J., & Newell, D. (2009). Back pain and associated healthcare seeking behaviour in nurses: A survey. *Clinical chiropractor*, 12, 130-143.
- Cornwall, J., & Melloh, M. (2012). Do New Zealand nurses claim more lumbar spine injuries than the general population? A retrospective study (1995-2009). *The New Zealand Medical Journal*, 125(1348), 112-115.
- Driscoll, T., Mannetje, A., Dryson, E., Feyer, A.-M., Gander, P., McCracken, S., Pearce, N., & Wagstaffe, M. (2004). *The burden of occupational disease and injury in New Zealand: Technical Report*. Wellington, New Zealand: NOHSAC.
- Jaromi, M., Nemeth, A., Kranicz, J., Laczko, T., & Betlehem, J. (2012). Treatment and ergonomics training of work-related lower back pain and body posture for nurses. *Journal of Clinical Nursing*, 21, 1776-1784.
- Ryall, S. J., Jenkins, V., & Roberts, L. C. (2005). Returning to work: Issues for nurses and managers following an episode of low back pain [Abstract]. *Journal of Bone and Joint Surgery*, 87-b(Suppl. 1), 34-35.

Rationale

I have chosen to display my literature review as a poster as the information is best displayed and disseminated to nurses (target population) by this medium.

Health promotion as defined by the World Health Organisation (n.d.) is “the process of enabling people to increase control over, and to improve, their health. It moves ... towards a wide range of social and environmental interventions”. The research topic of back pain in nurses needs social and environmental changes. Socially, everyone needs to be accepted for doing correct patient handling and environmentally there needs to be the correct equipment to carry out safe manoeuvres.

An effective poster can engage colleagues in conversation and get your point to as many people as possible. The poster focuses on one message, includes graphs and images that tell the story with as little text as possible, and has an obvious, well ordered sequence (Hess, Tosney, & Liegel, 2013). Potential readers passing by need to be attracted to your poster (Clendening, 2015).

I believe that my poster will engage colleagues and get my point across because it has one message, an image, a clear sequence, and attracts attention because the colours are catching and there isn't too much text. By engaging colleagues in conversations about back pain due to the aforementioned points, back pain and treatment of in nurses will become socially accepted and the environment will change appropriately.

References

- Clendening, J. (2015). Poster preparation & presentation. Retrieved from http://www.mc.vanderbilt.edu/documents/evidencebasedpractice/files/Posters/Poster_Prep_2015_web.pdf
- Hess, G., Tosney, K., & Liegel, L. (2013). Creating effective poster presentations. Retrieved from <http://www.ncsu.edu/project/posters/>
- World Health Organisation. (n.d.). Health promotion. Retrieved from http://www.who.int/topics/health_promotion/en/

PECOT Framework

PECOT category	Information relating to question	Explanation
Population	Nurses with back pain who treat it.	There are high incidence rates of back pain in nurses.
Exposure	Back pain.	Articles searched for will include nurses who have back pain.
Comparison	Nurses with back pain who do not treat it.	To discover what happens to nurses who do not treat their back pain.
Outcome	Results on work	We want to know if treating back pain has better results on work than not treating back pain.
Time	N/A	Treatment can be short or extensive and the back pain may not always be completely treated