Adaptation of the *Therapeutic return-to-work program* from MSD to common mental disorders

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Current literature

- Symptoms reduction not associated with return to work (Goldner 2004; van der Klink 2003, Nieuwenhuijsen 2004; St-Arnaud 2003)

- Few studies on return-to-work (RTW) rehabilitation programs for workers with common mental disorders (St-Arnaud, 2004)
  - Most programs focused on disease not disability

www.oecd.org/els/disability
Current literature

• Approaches oriented towards
  – cognitive behavioural interventions involving problem-solving
  – stress management strategies centred on the individual
  – do not focus on the work environment and concerted action

(Nystuen & Hagen, 2003; van der Klink, Blonk, Schene, & van Dijk, 2003)

Work Disability Paradigm

• Long-term work disability is no longer seen simply as the consequence of an illness but rather as the result of interactions between the worker and 3 main systems:
  – Health care
  – Work environment
  – Financial/compensation systems

(Loisel et al., 2001)
Current practice in Quebec

• Progressive return to work (RTW)
  – Are prescribed by general practitioner (GP)
    • Based on the number of hours
      – Passes from 3 to 5 days based on indirect evaluation (discussions)
    • Workplace often not informed
      – No coordination
    • Tasks not chosen
  – Few follow-up
    • Increase anxiety and anticipation

Progressive vs therapeutic

• Progressive ≠ therapeutic
  – Modulation of number of hours only
  – Leads to relapses

• TRW (Therapeutic return to work)
  – Progressive and therapeutic
  – Modulation of tasks, interactions, stress management
  – Frequent follow-ups

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Program

• Therapeutic Return to Work Program (TRW)
  – 3 Components
    • Work disability diagnostic interview (WoDDI)
    • Pre-TRW (clinic training)
    • TRW (work exposure)
      – Rehabilitation centralized in the workplace
      – Interdisciplinary team
      – Coordination - Collaboration of all stakeholders

• Program developed for low back pain patients
  – Effective (Loisel et al, 1997; Durand et al, 2002)
  – Cost-effective and cost-benefit (Loisel et al, 2002)

WoDDI: Work Disability Diagnostic Interview

• Developed for prolonged work disability from musculoskeletal disorders (Durand 2002, Marois & Durand, 2009)

• Structured interview integrating prognostic work disability factors (Durand et al. 2010)
  – Person
  – Work environment
  – Health service
  – Compensation system
Factors associated with prolonged work absence

• Individual
  – e.g., more than 44 year-old, man, live alone, symptom severity, perception of bad prognosis,…

• Work
  – e.g., conflict at work, casual work, work dissatisfaction, perception of an extra load of work, …

• Medico-administrative
  – e.g., legal process underway, high deductible insurance coverage,…

Factors related to TRW

• Factors hindering TRW
  – e.g., organisational changes (lay-off, technological changes…), competition, fears related to work resumption, lack of confidence in the programme, …

• Assessed during the rehabilitation process
Scale

- Each factor in the WoDDI are weighted

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<th>Not likely at all</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>Completely likely</th>
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Pre-TRW (clinic)

- Working on the prerequisite
- Decreasing work obstacles
- Implementation of working conditions
- Approach cognitivo-behavioural emphasising on problem solving
TRW

• progressive return to work with:
  – Structured tasks weekly
  – Capacity evaluation and progression weekly
  – Concerted action between the medical staff and the stakeholders
  – Occupational therapist or ergonomist

Examples

www.oecd.org/els/disability
Discussion

- TRW program appears to be adaptable from MSD to common mental disorder
- Disability paradigm is important and could orient the evaluation and treatment of those workers
- Systematic identification of risk factors seems to lead to a more targeted treatment and finally influence the rate of RTW
- Treatment of common mental disorder require to construct an action with the workplace
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