E-Poster

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Patient Experience of Predictive Factors for Work Disability After Lumbar Microdiscectomy

Topic: Specific Target Groups (Children, Women, Elderly, Athletes, Musicians, Refugees, Ethnic Groups, Workers, and Others)

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BACKGROUND

Surgical treatment of lumbar disc herniation is recognized as a safe and effective method for alleviating back pain and radiculopathy-associated symptoms. Precise data on average duration of work disability for working-age individuals after microdiscectomy in Latvia is unavailable, though work disability can range from four weeks to five months, depending on the patient's job type (physical or sedentary work) and health status following surgery. However, when working with patients post-microdiscectomy, we have observed that work disability can be prolonged and is associated with socio-economic factors, personal characteristics of the patient, and access to healthcare services.

The aim of this study is to explore the patient experience during the recovery phase after lumbar microdiscectomy and gather data on the factors that facilitate, or delay return to paid employment.

METHODS

Ten patients who received inpatient rehabilitation, aged 18 to 65, after lumbar microdiscectomy, prior employment at the time of surgery, and no co-morbidities, were invited and agreed to participate in the qualitative study. Sem-structured individual interviews were conducted with participants using a pre-prepared interview guide. Additionally, data on the number of days of work disability for each participant was collected. All interviews were transcribed and analyzed using coding and thematic analysis.

RESULTS

The interview analysis identified 97 codes, 15 categories, and six themes. According to main categories and themes from interviews, factors that facilitated return to work included the wish to obtain income, positive employer attitude towards the employee, social interaction with friendly colleagues, and satisfaction with the work. A flexible working schedule, the ability to plan work hours and workload independently, was also considered a facilitating factor. Furthermore, access to rehabilitation services was noted as a contributing factor in reducing recovery time. Factors delaying return to work included ongoing low-back pain post-surgery, which was considered as a more significant barrier than residual paresis. Concerns regarding the ability to endure the workload prior to surgery were mentioned by both physically demanding and sedentary job holders. Negative employer attitudes, particularly related to prolonged work absence due to recovery, were also highlighted as reasons for not returning to work or even changing occupation.

CONCLUSION

The experience of working-age individuals with work disability after lumbar microdiscectomy demonstrates that employer attitudes, healthcare organization, work environment, social support systems, personal factors, and medical issues directly influence each person's return to work.

Statement of Disclosures

None

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