

Keele Critically Appraised Topic (CAT Form)



Clinical Question

In adults with MSK pain, is a programme of manual handling and psychosocial support more effective at reducing employee's sickness absence than a manual handling training programme alone?

Clinical bottom line

We found no research evidence to answer our specific question.

Search criteria

Population Intervention Comparison Outcomes (PICO) themes	Description	Search terms
Population and Setting E.g. adults with OA, primary care		NHS staff, hospital workers, employees
Intervention or Exposure (i.e. what is being tested) e.g. manual therapy		Traditional manual handling Intervention to address psychosocial issues-relationships, control over work load
Comparison, if any e.g. usual care, leaflet		Traditional manual handling alone
Outcomes of interest e.g. Visual analogue scale, Range of motion		Work absenteeism
Types of studies e.g. Randomised Controlled Trails, Systematic reviews		Systematic Reviews, RCTs

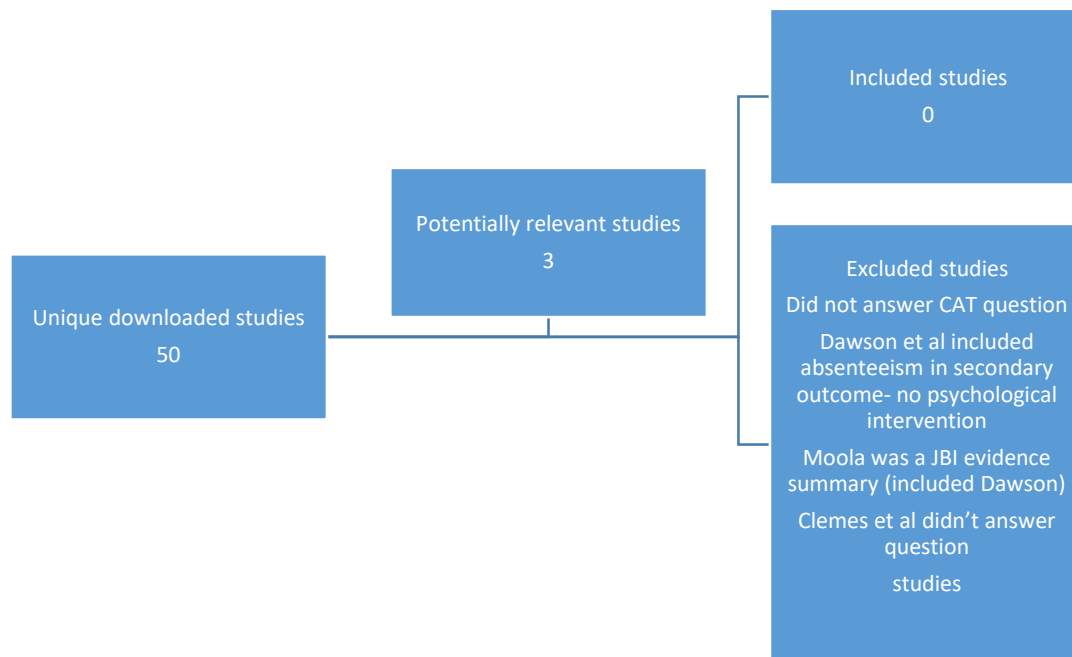
Databases searched

Clinical Knowledge Summaries, PEDro, BMJ Updates, Clinical Evidence, TRIP, Database, NICE, HTA, Bandolier, The Cochrane Library, Medline, Cinahl, Embase, PsycInfo, Professional websites, Joanna Briggs Institute, Web of Science, Sports discus and Pub Med

Date of search

30.01.23

Results of the search: include the number in each box



Summary

We did not find any research comparing manual handling training and psychosocial support to a manual handling training programme alone? A systematic review (Dawson et al 2006) whilst not directly answering our question, suggested that there was moderate quality evidence to suggest that manual handling in isolation is not effective in reducing back pain in nurses. They suggested multi-dimensional interventions are effective (studies included exercise, pain and lifestyle management, risk assessment training and early post injury management by physician, Physiotherapist and Occupational Therapist).

Implications for practice

Further research could explore the impact of a combining a traditional approach to manual handling with the additional of psychological support. It may be that NHS organisations have other system to offer staff support, such as counselling services. This is not packaged as part of the manual handling training offer, and relies mainly on self-referral for help.

What would you post on X (previously Twitter)?

If we included psychological support as part of traditional manual handling training for NHS workers, would this reduce work absenteeism? High quality research needed.




References

AP Dawson, SN McLennan, SD Schiller, GA Jull, P Hodges, S Stewart Interventions to prevent back pain and back injury in nurses: a systematic review Occup Environ Med 2007;64:642–650.

[Link to Dawson et al \(2007\) paper](#)

doi: 10.1136/oem.2006.030643

Please tick the box that best reflects your clinical bottom line and include the picture on page 1

CAT image	Evidence quality	Checkbox
	Good quality evidence to support use....	<input type="checkbox"/>
	Insufficient or poor quality evidence OR substantial harms suggest intervention used with caution after discussion with patient...	<input type="checkbox"/>
	No good quality evidence, do not use until further research is conducted OR Good quality evidence to indicate that harms outweigh the benefits....	<input checked="" type="checkbox"/>

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