

# **Back pain Assessment Clinic: The feasibility and effectiveness of a primary care-based, physiotherapy-led spinal service.**

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## **Background**

Spinal disorders are the most prevalent musculoskeletal condition, placing great demands on health services. Currently patients with a spinal disorder can wait 2 years for a Melbourne Health (MH) Neurosurgery or Orthopaedic appointment. However, evidence indicates only a small percentage of patients benefit from surgery and delayed care can lead to deterioration, increase risk of chronicity, defer initiation of appropriate non-operative management and achieve poorer health outcomes.

## **Methods**

The Back pain Assessment Clinic (BAC) model was developed in collaboration with Neurosurgery, Orthopaedics, Pain Services, Rheumatology and Physiotherapy at MH. The BAC commenced in July 2014 with funding from the Department of Health and is one of the first primary care-based, tertiary back pain clinics in Australia. Advanced musculoskeletal physiotherapists and a rheumatology registrar work under the guidance of a rheumatologist to undertake diagnostic triage and a comprehensive management plan. A central triage process with representatives from Neurosurgery, Orthopaedics, Rheumatology and Physiotherapy reviews all incoming spinal referrals. Referrals are excluded from the BAC in the presence of 'red flags' or if there is high likelihood of surgical intervention. Patients requiring non-operative management are given priority access to enhanced community services, while those requiring surgical, rheumatology or pain services input are fast-tracked to MH.

## **Results**

522 patients were triaged into the BAC (383 patients accepted, 91 awaiting appointment, 61 uncontactable, 2 deceased, 3 declined). Most referrals were from general practitioners (88%), directed to Neurosurgery (79%) or Orthopaedics (21%); 43% were on the existing waiting lists; 63% were for back pain; 24% neck pain. Patients were seen in the BAC within 10 weeks from referral. Of the patients reviewed in the BAC, 63% of patients were referred for physiotherapy, 27% had medications altered, 28% had investigations ordered and 5% were referred for spinal injections. 5% of patients were referred to pain services, 2% Neurosurgery, 2% Orthopaedics and 2% Rheumatology. There has been good patient satisfaction and no complaints or adverse incidents with the service.

## **Discussion**

Preliminary evaluation indicates that a primary care-based, tertiary back pain clinic is a feasible, safe and effective model. Further evaluation is being undertaken to determine the level of satisfaction, cost-effectiveness and long-term impact of the BAC.