

Supporting the mental health of people returning to work after a long-term injury

Mark is 30 years old and works in a manufacturing plant as a press operator. His position involves frequent lifting and bending, as well as long periods of sitting. Mark has previously suffered from some back pain, but felt that it was under control. His doctor had advised him to lift no more than 20 kg. Mark did not pass this information onto his employer. Mark always enjoyed his job and had good relationships with his manager and co-workers. Mark is happily married to Jenny and they have two children, aged 2 and 6. He and his wife have a wide circle of friends, but no close family nearby. Mark is heavily involved with the local soccer club and coaches and plays on a weekly basis.

Mark injured his back while moving a heavy piece of machinery in the factory. The injury was serious enough to result in a trip to the emergency department, where he was sent home with pain killers and told to visit his GP. The GP sent Mark to have an MRI scan, and Mark was diagnosed with a herniated disc. Mark submitted a workers' compensation claim, which was accepted.

The initial medical certificate gave Mark one month off work. Mark was prescribed opiates for pain relief, but needed to increase the dosage to manage his pain. At the end of the month, Mark continued to suffer significant pain and was unable to return to work. Mark's GP supported him, and recommended an additional three months off work. During this time, Mark was taking around 160mg of OxyContin a day, and he was reluctant to move for fear of increasing the pain. His mobility decreased, and he struggled to manage any more than basic personal care tasks.

Since Mark's injury, he has not visited his soccer club, even to watch a game. His GP has encouraged him to take more interest and be active in his soccer club, by helping with the newsletter or writing rosters. The GP encouraged him to keep in touch with his friends and go out more. Mark has struggled to do this.

**Mental Health
Professionals' Network**

Emirates House
Level 8
257 Collins Street
Melbourne
VIC 3000

postal
PO Box 203
Flinders Lane
VIC 8009

email
contactus@mhpn.org.au

telephone
1800 209 031

www.mhpn.org.au

After the first four months off work, Mark sought stronger pain relief medication. Instead, the GP referred Mark to a physiotherapist who recommended weekly treatments including, massage and exercises. However, Mark didn't do the exercises because he was worried that the exercises would make the pain worse. Mark's chronic pain has persisted, he has been off work for nine months and his mood is increasingly unmotivated and low. Jenny has become frustrated with his attitude and his condition. Her job is also physically demanding, and she is worn out from working, housework and caring for the children. Her sympathy for Mark's condition has reached its limit. There is considerable tension in the household, and this is reflected in the children's behaviour.

Mark's friends from his soccer club and his workmates initially rallied around him, but the contact has become less frequent and Mark feels as though life has moved on without him. Mark is concerned he may lose his job, but feels he cannot return to even modified duties. The GP has mentioned the possibility of surgery if his symptoms do not improve.

This webinar has been made possible through funding provided by Safe Work Australia. Learn more about Safe Work Australia by visiting www.swa.gov.au

