A considerable proportion of work absence is attributed to low back pain (LBP), with high lost productive time and health spending, special after a work-related injury.

The French Health Insurance try to improve the return-to-work for these patient with a early care in rehabilitation center.

In this study, we aimed at determining if this early care three months after a work stoppage with work-related injury improve the return-to-work three months after, and at determining factors influencing the return-to-work.

Five center in France took part in this protocol, in a retrospective study.

147 LBP patients (handler) were includes in 2016, three months after a work-related injury.

The intervention was a case-management by a « Conseiller Risques Professionnels » and a multidisciplinary functional restoration program for 67 patients. The other were follow-up only about the return-to-work.

The outcome was the return-to-work rate three months after the intervention. Both of rates were compared.

Unfortunately, we fund an adverse effect of the multidisciplinary functional restoration program from patients with LBP in work stoppage after a work-related injury.

Maybe the overmedication, or the drama causes by this program in hospitalization, must influence the situation of workers.

Surprisingly, sports’ practice did not show any influence on the results.

Active physiotherapy should be offered to any patient in this situation to promote the return-to-work.

As Pr. Foster describes in her article published in the LANCET journal in June 2018, we need to continue researching new strategies focused on best practices, redesigning care pathways, joint health and at work and changing claim and disability policies.

In the 52 remaining patients, 26 patients (50%) were at work at 3 months : 16 (30,2%) in full time at the same job. 9 (17%) were in occupational retraining. 11,3% were unemployed (after recognition of unfitness by the occupational doctor).

For the other 80 patients, 70 (87,5%) were at work at three months.

The analysis shows a significant difference between the two groups regarding return-to-work by measuring the number of days off work (p<0,0001) for the benefit of the non-intervention group.

Active physiotherapy (ρ=0.024), TAMPA (p=0.0004), FABQ (p=0,006), DALLAS (p=0,002) and Visual Analog Scale (VAS, p=0.03) after the program were correlated with the return-to-work but not with LBP background (with a tendency towards meaning, p=0,056) and being sportif before or after the program (p=0,11 before and p=0,42 after).

There were no relation between return-to-work and VAS in connection with the world of work.

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