

Awareness, Prevalence and Perceptions of Work-Related Musculoskeletal Disorders (WRMSDs):

A Survey of Obstetrics & Gynaecology Trainees

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Introduction

- Obstetrics and Gynaecology (O&G) training comprises clinical tasks requiring adaption of specific body postures and skilled movements.
- Therefore, O&G trainees are presumably at a higher risk of developing work-related musculoskeletal disorders (WRMSDs).

Objectives

- To determine the prevalence of WRMSDs among O&G trainees in Sri Lanka, while assessing their related knowledge and views and to evaluate the factors associated with WRMSDs in this group.

Methodology

- A cross-sectional survey of O&G trainees of all levels in Sri Lanka was conducted using a 25-item online questionnaire on demography, O&G training and WRMSDs.
- Data was described using percentages and associations were analyzed using chi-square test.

Results

- The response rate to survey was 36.5% (38/104).
- 59.4% of the participants experienced six or more WRMSD episodes, while neck (65.6%), lower back (62.5%) and arm (37.5%) being the most affected areas.
- Laparoscopic (43.8%) and open (37.5%) gynaecology surgery were the main preceding events.
- 54.8% reported complete resolution while 9.4% required leave for the pain.
- The career-impact of WRMSDs is negligible according to 23.7%, while majority had opposite views.
- Performing gynaecology surgery over 20 hours/week, being the primary operator/surgeon and lack of short breaks were significantly associated with WRMSDs ($P < 0.05$).
- Over two-thirds lacked prior awareness on WRMSDs and endorsed relevant formal training in their curriculum.

Chart 1 : Age distribution of the study population

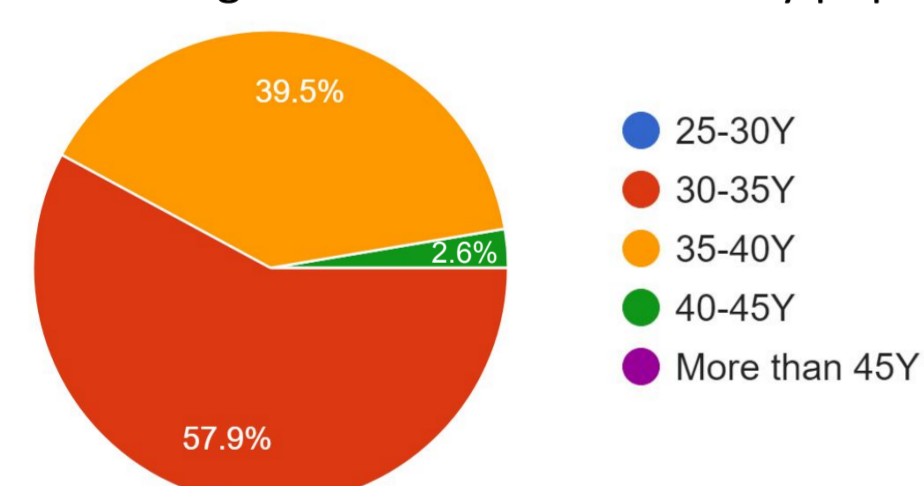


Chart 2 : Year of the O&G training of participants

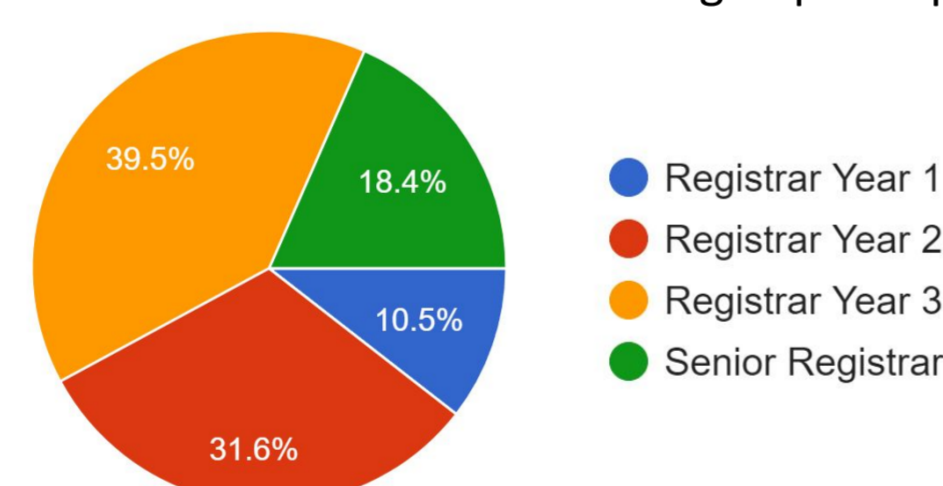


Chart 3 : Body site(s) of the trainees affected by WRMSDs during O&G training

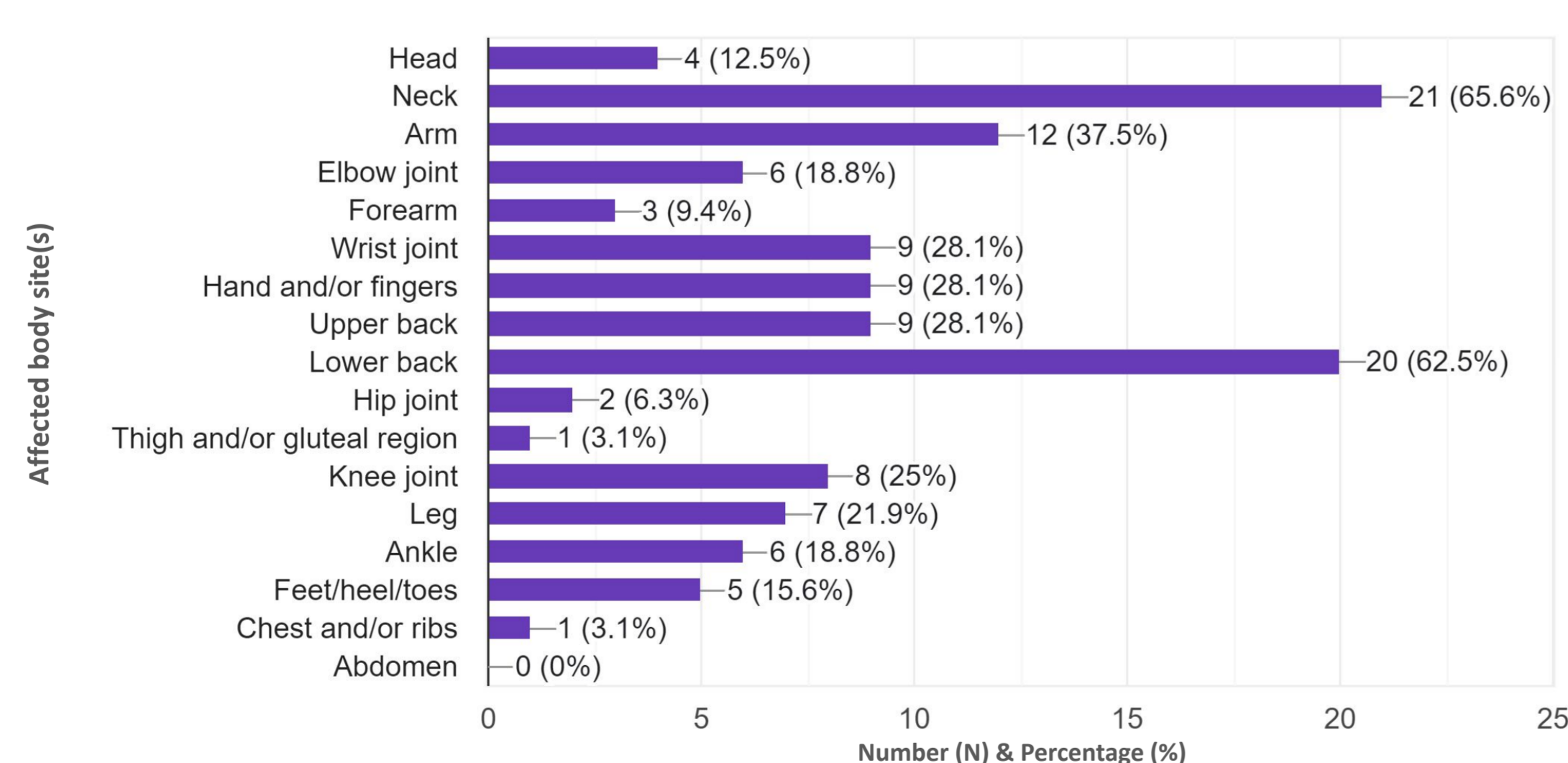


Chart 4 : Predisposing/causative event for the worst episode of WRMSDs

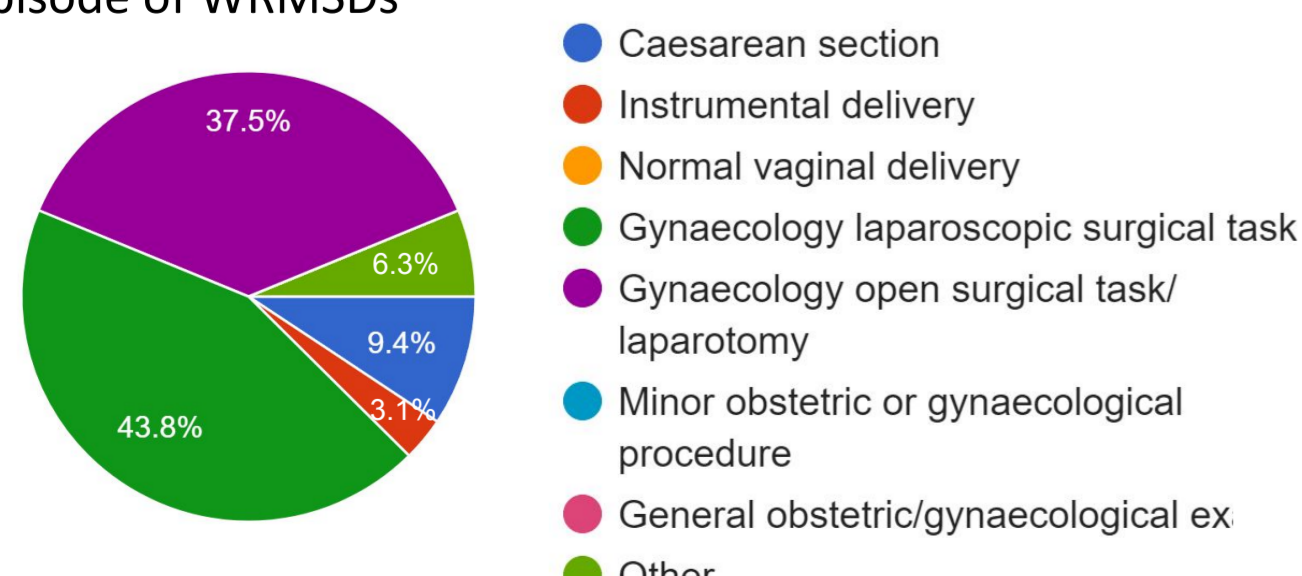


Chart 5 : Duration of the worst episode of WRMSDs experienced during training

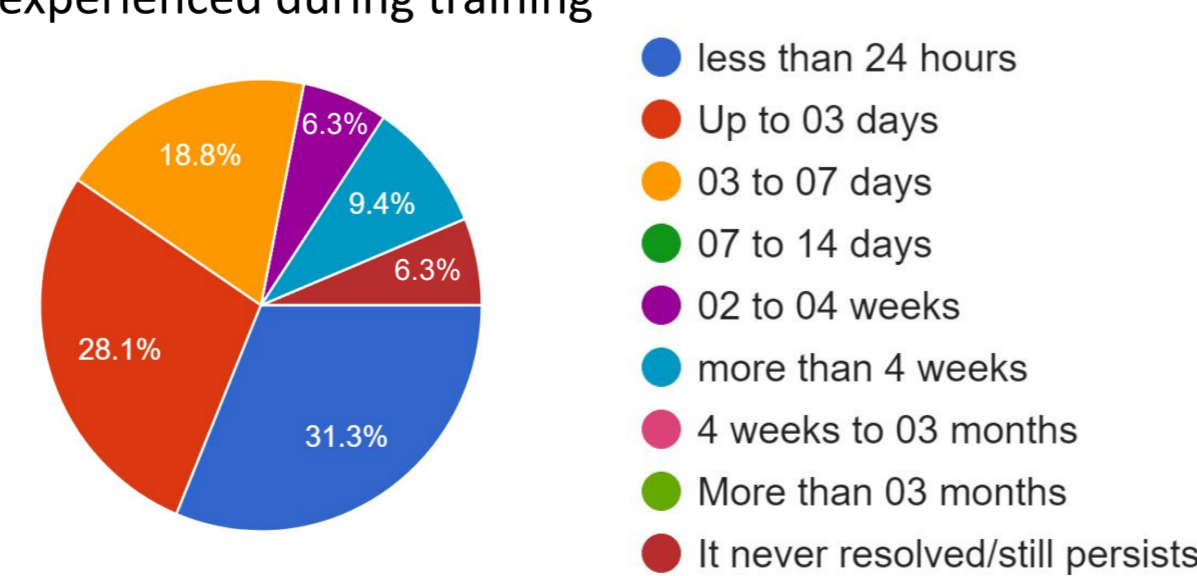


Chart 6 : Trainees' prior formal training in operative ergonomics, correct clinical postures, movement, etc.

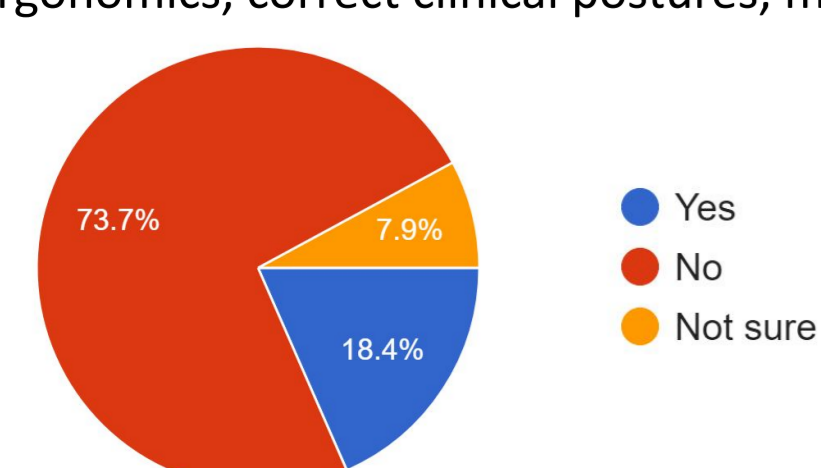


Chart 7 : Perception on availability of supportive provisions to assist trainees suffering from WRMSDs

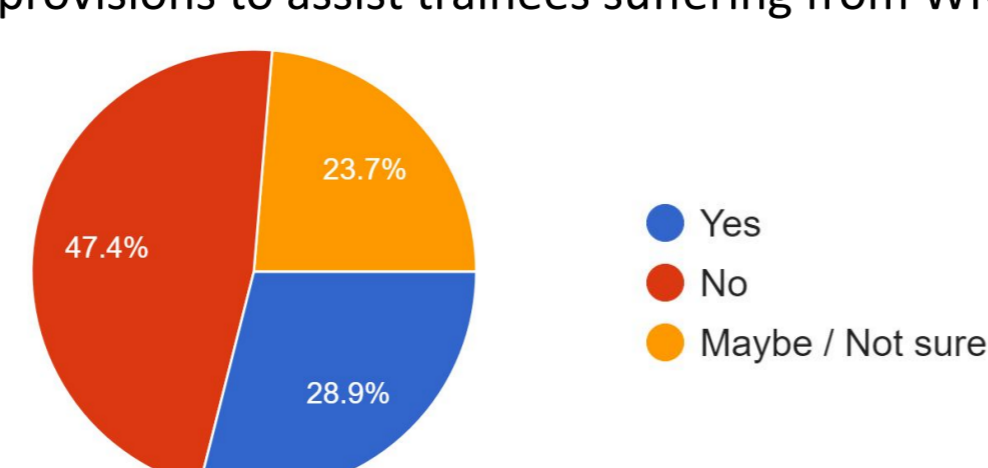
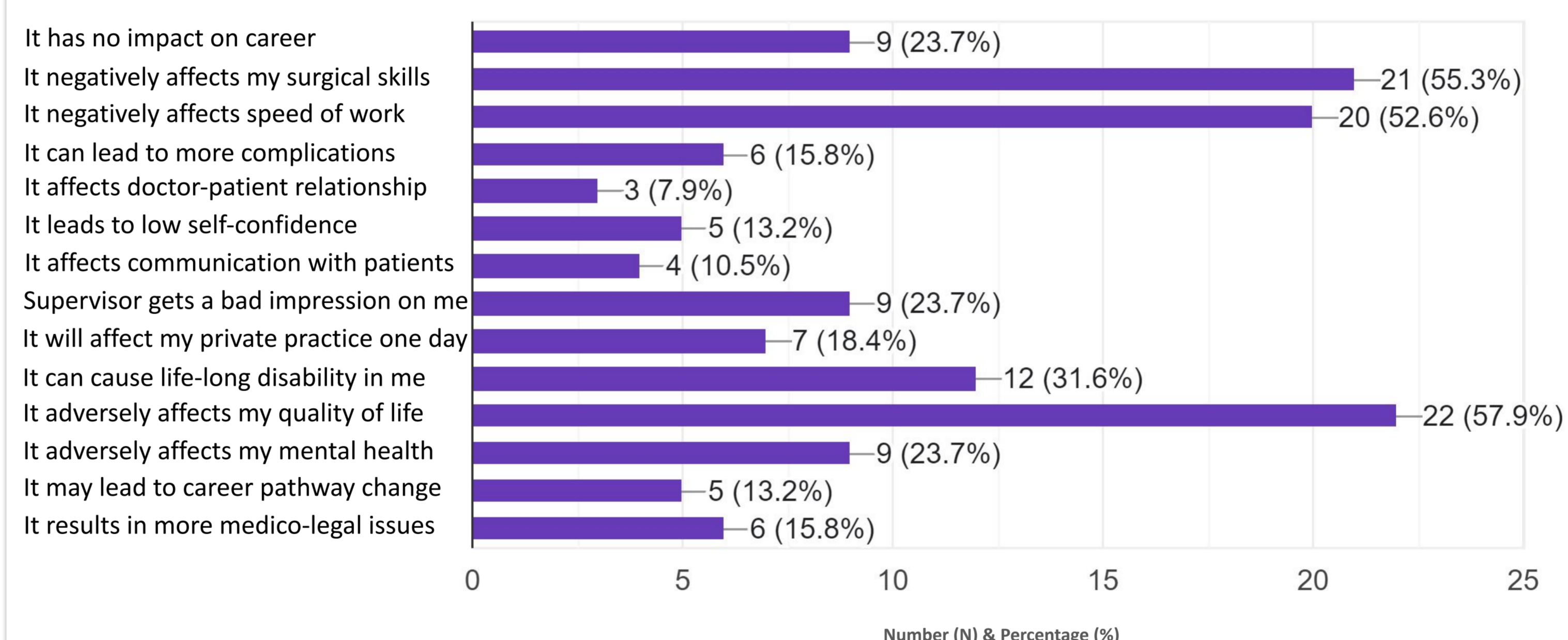


Chart 8 : Trainees' perceptions on O&G career related repercussions of WRMSDs



Discussion & Conclusion

- Prevalence of WRMSDs is high among Sri Lankan O&G trainees and implementation of formal training programme on WRMSDs and clinical ergonomics will be beneficial.
- Supportive provisions for victims of WRMSDs should be revised and reinforced.

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Disclosure

Authors have no conflict of interest to declare

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