



**EUROSPINE DIPLOMA IN
INTERPROFESSIONAL SPINE CARE (EDISC)**

**MODULE 4:
ASSESSMENT, DIAGNOSIS AND
MANAGEMENT OF SPINAL PAIN**

4-5 July 2019

PRELIMINARY PROGRAMME

QUICK FACTS

WHEN:	4-5 July 2019
WHERE:	Geneva, Switzerland SWISS Foundation for Innovation and Training in Surgery (SFITS) Rue Gabrielle-Perret-Gentil 4 1205 Geneva SWITZERLAND +41 22 322 91 00 https://www.sfits.ch
MAXIMUM ATTENDEES:	30 delegates
REGISTRATION FEE:	EUROSPINE Member: €600 Non-member: €800
CME CREDITS:	Application to EACCME pending
LANGUAGE:	English
DRESS:	Casual
IMPORTANT NOTE:	Attendance at every session is mandatory. This will be a paperless course and no printed programme will be provided. A wireless Internet device (mobile phone/tablet/computer) will be necessary to access on-line resources during the course and for completing the course evaluation. Please bring one with you. The course evaluation is mandatory to obtain the CME certificate.

TARGET AUDIENCE

Chiropractors, medical practitioners, naprapaths, osteopaths, physiotherapists, and other health professionals engaged in spine care, graduated as a clinician from a recognised institution (i.e. professional school or university).

At least two years of clinical experience is recommended but all new graduates are encouraged to register.

AIMS OF THE MODULE

Assessment & Diagnosis

The aim of day 1 is to understand the limitation of physical examination and imaging as well as the cultural differences between professions when posing a diagnosis. We will also discuss the impact of comorbidity on persistent back-pain and the influence of the biopsychosocial model in understanding back-pain.

Management of Spinal Pain

The aim of day 2 of this module is to co-develop management plans for patients presenting with spinal pain +/- radiculopathy. The plans will be underpinned by research evidence and best practice, and will be tailored according to the needs and characteristics of each patient.

LEARNING OUTCOMES

Upon successful completion of this module, learners will be able to:

Assessment & Diagnosis (DAY 1)

1. Understand back and/or neck pain in a biopsychosocial perspective
2. Understand how the biopsychosocial perspective differs from other model perspectives
3. Understand how elements from the general medical history may impact on the understanding of the individual's back and/or neck pain
4. Understand when to refer for imaging examination
5. Know red flags
6. Understand risks for long-term sick leave and disability (yellow flags)
7. Be able to make decisions on modality for imaging examination
8. Be able to put the imaging description into a clinical context
9. Be able to give a diagnosis according to the biopsychosocial perspective of LBP
10. Be able to disseminate the diagnosis in a comprehensible way to the individual
11. Be able to communicate any limitations in functioning following from the diagnosis to the individual, the employer, insurer and others – or mitigate unnecessary limitations imposed by the individual himself/herself

SESSION 1 DIAGNOSTICS AND PHYSICAL EXAMINATION

- 1.1 Understand the practical utility of diagnostics (Red Flags/Yellow Flags/Other Flags)
- 1.2 Understand cultural differences between professions may lead to different terms that probably express the same
- 1.3 Appreciate the impact of comorbidity on persistent back and/or neck pain in adult age
- 1.4 Discuss how to make a diagnosis and how this impacts on treatment recommendations according to training and practice
- 1.5 Understand the utility and limitations of patient history and physical examination – aims and purposes what does the clinician need to know
- 1.6 Conduct a physical examination i.e. orthopaedic and neurological examination
- 1.7 Understand how the biopsychosocial model differ from other models of understanding back pain

SESSION 2 IMAGING

- 2.1 Summarize clinical use of imaging
- 2.2 Discuss what, when, and why do we need x-ray and/or imaging
- 2.3 Discuss interpretation of imaging based on vignettes
- 2.4 Reflect on the utility and limitations of imaging examinations

SESSION 3 ROLE PLAY

3.1 Perform the following

- Uptake of a systematic anamnesis
- Physical examination, orthopaedic and neurological examination
- Discuss referral for imaging
- Understand the impact of co-morbidity for recovery
- Make a conclusive assessment

3.2 Discuss core issues for patient history taking and physical examination

Management of Spinal Pain (Day 2)

SESSION 4 CLINICAL PATHWAYS

4.1 Identify the clinical pathway for the management of a) 'non-specific back pain' and b) radiculopathy in their country, and explain how these differ to other European pathways

SESSION 5 SHARED DECISION-MAKING

5.1 Evaluate participants shared decision-making skills, scoring an audio-recorded consultation with the OPTION tool

SESSION 6 STRATIFIED CARE

6.1 Explain the benefits of stratified care and identify the 3 subgroups (low, medium and high risk of poor outcome) using the STarT Back Screening Tool

SESSION 7 QUICK FIRE TASK & DISCUSSION

7.1 Design a plan of early and long-term management based on the risk of poor outcome, including self-management advice for a person with spinal pain

SESSION 8 EVALUATING THE EVIDENCE BASE FOR PATIENTS WITH AND WITHOUT RADICULOPATHY

8.1 Using the evidence base for spine interventions, identify treatment preferences for patients experiencing spinal pain with and without radiculopathy

SESSION 9 IDENTIFYING PSYCHOLOGICAL STRATEGIES TO INCORPORATE INTO PRACTICE

9.1. Identify psychological strategies to incorporate into practice to:

- Enable patients to self-manage and make the most of living with their pain and distress
- Identify when to refer patients to a psychologist / psychiatrist
- Support patients with psychological distress
- Promote positive behaviour change

	Learning outcome
What treatments are recommended / available in my country?	4.1
↓	
How do I discuss and agree a treatment plan with my patient?	5.1
↓	
Is the patient at risk of poor outcome? [NB. Stratified care]	6.1&7.1
↓	
What advice am I going to give and what treatments am I considering?	7.1
↓	
What non-invasive & invasive treatment are most likely to work for this patient?	8.1
↓	
What psychological strategies am I going to use to optimise outcome?	9.1

INSTRUCTIONAL METHODS

Pre-learning & e-learning activities

Assessment & Diagnosis

- Preparatory readings: Read the articles listed in the Ressource section below
- E-learning methods: Watch the following video prior to the course:
<https://www.youtube.com/watch?v=BOjTegn9RuY>

Management of spinal Pain

- Preparatory reading: Search and identify the clinical pathway for the management of non-specific back pain and radiculopathy in the learner's own country and compare it to other pathways eg. UK [outcome 1]
- Audio-record a consultation with a patient consulting with spine pain (with their consent) [outcome 2]
- Watch a short presentation showing how to score the shared decision-making that took place using the OPTION tool [outcome 2]
- Watch a 9-minute video <https://www.keele.ac.uk/sbst/clinician/> outlining the STarT Back Screening Tool and how to score it and identify the 3 subgroups [outcome 3].
- Classroom teaching: Interactive lectures [outcomes 1, 2, 3, 6]
- Facilitated group discussions based on case examples [outcomes 4, 5 & 6]

ASSESSMENT

As part of the pre-learning for this module, learners will have audio-recorded a patient consultation and scored the shared decision-making that took place using the OPTION tool. Three months after completing this module, they will audio-record another consultation and re-measure the shared decision-making.

The assessment will be a written reflection on any change in scoring and what modifications they have made to their practice to facilitate shared decision-making.

COURSE EVALUATION BY THE PARTICIPANTS

In line with EACCME's requirements for accredited activities, participants will be requested to complete a mandatory course evaluation at the end of the module in the form of a short online survey. Responding to the survey is a condition in order for participants to obtain their CME certificates

LIST OF RESOURCES

MINIMUM REQUIREMENT

Assessment and diagnosis

- Cedraschi C, Nordin M, Haldeman S, Randhawa K, Kopansky-Giles D, Johnson CD, Chou R, Hurwitz EL, Côté P. The Global Spine Care Initiative: a narrative review of psychological and social issues in back pain in low-and middle-income communities. *European Spine Journal*. 2018 Jan 27:1-0.
- Hartvigsen J, Hancock MJ, Kongsted A, Louw Q, Ferreira ML, Genevay S, Hoy D, Karppinen J, Pransky G, Sieper J, Smeets RJ. What low back pain is and why we need to pay attention. *The Lancet*. 2018 Mar 21.
- Nordin M, Randhawa K, Torres P, Yu H, Haldeman S, Côté P, Torres C, Modic M, Mullerpatan R, Cedraschi C, Chou R. The Global Spine Care Initiative: a systematic review for the assessment of spine-related complaints in populations with limited resources and in low-and middle-income communities. *European Spine Journal*. 2018 Feb 28:1-2.

Management of spinal Pain

- Elwyn G, Hutchings H, Edwards A, Rapport F, Wensing M, Cheung WY et al (2005) The OPTION scale: measuring the extent that clinicians involve patients in decision-making tasks. *Health Expect* 8(1):34–42
- Watch the short presentation about how to score a consultation using the OPTION tool.

SUPPLEMENTARY

Management of Spinal Pain

- NHS England National Pathway of Care for Low Back and Radicular Pain: https://docs.wixstatic.com/ugd/dd7c8a_5adf479cb66b4e8ba547bdcd9dcc6e5.pdf
- STarT Back Screening Tool: 9-minute video: <https://www.keele.ac.uk/sbst/clinician/>

EXTENDED LEVEL

Management of Spinal Pain

- National Institute for Health and Care Excellence: Low back pain and sciatica in over 16s: assessment and management. Guidelines available from: <https://www.nice.org.uk/guidance/ng59>
- STarT Back Screening Tool and how to score it and identify the 3 subgroups: For further information on the tool, see: <https://www.keele.ac.uk/sbst/startbacktool/usingandscoreing/>
<https://www.sciencedirect.com/science/article/pii/S0140673611609379>

COURSE CHAIRS

LISA ROBERTS	PHYSIOTHERPIST, SOUTHAMPTON, UNITED KINGDOM
ERIK L. WERNER	PRIMARY CARE SPECIALIST, OSLO, NORWAY

FACULTY

CHRISTINE CEDRASCHI	PSYCHOLOGIST, GENEVA, SWITZERLAND
PIERRE CÔTÉ	EPIDEMIOLOGIST, TORONTO, CANADA
STEPHANE GENEVAY	RHEUMATOLOGIST, GENEVA, SWITZERLAND
OLIVIER LANLO	CHIROPRACTOR, TOULOUSE, FRANCE
STEVEN VOGEL	OSTEOPATH, LONDON, UNITED KINGDOM
ALBERTO ZERBI	RADIOLOGIST, MILANO, ITALY
PSYCHOLOGIST TBC*	TBC

SCIENTIFIC PROGRAMME
ASSESSMENT, DIAGNOSIS AND MANAGEMENT OF SPINAL PAIN
THURSDAY, 4 JULY 2019
COURSE ATTENDANCE IS MANDATORY

TIME	TOPIC	FACULTY
07:30-08:00	Course Registration and Welcome Coffee	
08:00-08:15	Introduction	Erik L. Werner
SESSION 1 DIAGNOSTICS & PHYSICAL EXAMINATION		
08:15-09:00	Diagnostics – classification according to the guidelines	Erik L. Werner
09:00-09:30	How diagnostics may differ between professions	Olivier Lanlo
09:30-09:45	Comorbidity	Erik L. Werner
Coffee Break 30 min		
10:15-11:15	Workshop on diagnostics and physical examination	All faculty
11:15-11:45	The biopsychosocial model – what is it, what does it mean for the understanding of back pain?	Christine Cedraschi
11:45-12:05	The anamnesis	Olivier Lanlo
Lunch Break 60 min		
SESSION 2 IMAGING		
13:00-13:15	Imaging – general overview	Alberto Zerbi
13:15-13:45	Imaging – specific indications for different imaging modalities	Alberto Zerbi
13:45-14:30	Workshop on imaging – interpretation of descriptions from the radiologist – the clinical use of imaging	All faculty
14:30-14:50	How may we reduce unnecessary imaging and why? – Plenary discussion	Erik L. Werner
Coffee Break 30 min		
SESSION 3 ROLE PLAY		
15:20-16:20	Role play: participants in groups play patient and health care provider	All faculty
16:20-16:30	Summary and adjourn	
End of day 1		

SCIENTIFIC PROGRAMME

ASSESSMENT, DIAGNOSIS AND MANAGEMENT OF SPINAL PAIN

FRIDAY, 5 JULY 2019

COURSE ATTENDANCE IS MANDATORY

TIME	TOPIC	FACULTY
07:30 - 08:00	Registration and Welcome Coffee	
08:00 - 08:10	Introduction	Lisa Roberts
SESSION 4 CLINICAL PATHWAYS		
08:10 - 08:30	Lecture: Outlining clinical pathways for spinal pain	Pierre Côté
08:30 - 09:00	Facilitated group discussion: Variations in pathways	
SESSION 5 SHARED DECISION-MAKING		
09:00 - 09:30	Lecture: Shared decision-making (SDM)	Lisa Roberts
09:15 - 10:15	Reflection on OPTION task and facilitated discussion on how to enhance SDM	
10:15 - 10:30	Outline of assessment of module: What is required with opportunity for questions	Lisa Roberts
Coffee Break 30 min		
SESSION 6 STRATIFIED CARE		
11:00 - 11:15	Lecture: Stratified care	Steven Vogel
11:15 - 12:00	Early and late treatment plans Group case study using stratified care	
SESSION 7 QUICK FIRE TASK & DISCUSSION		
12:00 - 12:30	Advice for self-management ⁴	Lisa Roberts
Lunch Break 60 min		
SESSION 8 EVALUATING THE EVIDENCE BASE FOR PATIENTS WITH AND WITHOUT RADICULOPATHY		
13:30 - 13:45	Outline the task and 4 brief case studies	Stephane Genevay
13:45 - 14:45	Small group discussions to apply evidence of treatment approaches to the case studies	Stephane Genevay + Faculty
14:45 - 15:15	Plenary discussion	Stephane Genevay
Coffee Break 30 min		
SESSION 9 IDENTIFYING PSYCHOLOGICAL STRATEGIES TO INCORPORATE INTO PRACTICE		
15:45 - 16:45	Interactive lecture: Distinguishing between pain-related distress, catastrophic distress, and clinical depression. [Includes discussion around orange flags, case studies including when to refer to psychologist / psychiatrist.]	TBC *
SESSION 10 SUMMARY		
16:45 - 17:00	Course evaluation (Mandatory for all participants)	All participants
17:00	END OF MODULE	



CONTACTS

EUROSPINE, the Spine Society of Europe

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COURSE ORGANISATION

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SCIENTIFIC CONTENT

Prof. Lisa Roberts & Dr Erik Werner

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Prof. Margareta Nordin & Prof. Pierre Côté

Co-chairs, Non-surgical Diploma Task Force

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