



Healthcare utilisation for back pain by Australian women aged 59-64.

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A thesis submitted for the degree of Master of Health Services Research at the University of Technology Sydney, March 2018.

CERTIFICATE OF ORIGINAL AUTHORSHIP

I certify that the work in this thesis has not previously been submitted for

a degree nor has it been submitted as part of requirements for a degree

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I also certify that the thesis has been written by me. Any help that I have

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literature used are indicated in the thesis.

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Date: 16th March 2018

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Acknowledgement

- I extend my heartfelt gratitude to my supervisor Professor David Sibbritt for his guidance and shaping me to be a better student and researcher. For showering his wisdom and research skills to bring the best out of me. I feel extremely fortunate to have the opportunity to be supervised by an outstanding individual who believed and motivated me in achieving my thesis. My learning has enhanced and I have developed strong passion for further research.
- I extend my deepest thankfulness to my supervisor Professor Jon Adams for providing me an opportunity to study at ARCCIM, supporting, guiding and shaping me to be a better student and researcher.
- I extend my heartfelt gratefulness to my supervisor Postdoctoral Research
 Associate Dr Jane Frawley for her persistence coaching and supervision
 guidance on data analysis and to develop my article and thesis. Thank
 you, Jane, for making the statistical analyses a fun filled experience.
- Several other people deserve a big thank you for their contribution to this
 thesis. I extend heartfelt gratitude to all the tutors who taught individual
 courses during my research Masters.
- Thanks to all the administration staff at University of Technology Sydney I will like to thank all the amazing administration and library staff for being true angels and supporting me during my research. Special thanks to Mrs.
 Priya Nair for providing administration support throughout the years.
- Special thanks to Dr. Vijayendra Srinivasa Murthy for his support and encouragement.

- Thanks to Mary Allan for providing moral and technical support.
- I am grateful to the Australian Government Department of Health and Ageing (DOHA) for funding and the Australian Research Council (ARC) (DP110104636) for funding.
- Further, I would like to offer my sincere thanks to the women who
 participated in the ALSWH research which this thesis is based on. Their
 participation in the survey helps individuals with back pain, healthcare
 providers and health policy makers.
- Thanks to my brother Anand Kumar and sister-in-law Roja and their children Akhil and Chikki for supporting me and standing by me for pursue my education.
- Thanks to my Late mother-in-law, Mrs. Rajamani Maddela for showering her blessing and having me in her prayers.
- Thanks to my husband and daughter, Dr Sridhar Maddela and Miss Srija
 Maddela, I am extremely grateful for their understanding, cooperation,
 support and encouragement at all the time.

Dedications

Dedicated to my parents and family

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List of Abbreviations

ALSWH Australian Longitudinal Study on Women's Health

ASGC Australian Standard Geographical Classification

CAM Complementary and Alternative Medicine

DALYs Disability-adjusted life-years

Eol Expression of Interest

GP General Practitioner

HIV Human immunodeficiency virus

HSR Health Services Research

LBP Lower back pain

NSAIDs Non-Steroidal Anti-Inflammatory Drugs

UK United Kingdom

US United States

Manuscript for publication incorporated into the thesis

The manuscript contained in the thesis (appendix 3) will be submitted to a peer reviewed journal .

The title of the manuscript contained in the thesis is as follows:

The characteristics of women who consult health care practitioners for back pain: a nationally representative sample of 1,310 Australian women aged 59-64 years.

Abstract

Background: Back pain affects a substantial proportion of the adult population and back pain sufferers tend to explore a wide range of health care options. This study investigates the health care utilisation amongst Australian women with back pain.

Method: This is a sub-study of the Australian Longitudinal Study on Women's Health (ALSWH), designed to investigate multiple factors affecting the health and well-being of women over a 20-year period. The study focuses on 1,851 women aged 59-64 years, who had indicated that they had previously sought help from a health care practitioner for back pain.

Results: Half of the women (56.5% n=738) with back pain had consulted a general practitioner (GP), 16.2% (n=213) had consulted a medical specialist and 37.3% (n=488) had consulted a physiotherapist for their back pain. Women consulted a GP and/or a medical specialist for back pain related symptoms/conditions: back pain (56.2%); leg pain or sciatica (39.7%); sleeping problems (36.9%); anxiety/tension (27.9%), pins and needles/numbness (27.7%); neck pain (27.6%); fatigue (25.5%); depression (25.1%); muscle spasm (23.6%); headaches/migraines (23.0%); stiffness (21.6); arm pain (19.1%); weakness (15.7%); nausea (12.7%); and instability (7.1%). On the other hand, a physiotherapist was consulted: back pain (68.0%); neck pain (45.5%); leg pain or sciatica (39.3%); stiffness (32.2%); muscle spasm (22.3%); arm pain (21.3%); pins and needles or numbness (17.6%); headaches or migraines (13.9%); weakness (8.8%); instability (5.5%); and other problems (14.1%). Further, women with regular or continuous back pain were more likely to consult a GP (OR=3.98), medical specialist (OR=5.66) and a physiotherapist (OR=1.63). Women who consulted a general practitioner and/or a medical specialist had a statistically

significantly higher mean typical back pain intensity compared to women who did not consult a general practitioner (p=0.001) or medical specialist (p<0.001).

Conclusion: Australian women with back pain were more likely to consult a GP, medical specialist or physiotherapist if they had more regular/continuous back pain. However, women were more likely to consult a GP for back pain associated with psychosomatic comorbid conditions and consulted a physiotherapist for musculoskeletal issues. There is a need for a more formal cross-referral system, wherein medical specialists and physiotherapists refer patients with comorbid conditions to a GP if they were the first practitioners to be visited. It is important that future research to further investigate the consultation and referral patterns identified in this study to inform healthcare industry and the policy makers about the healthcare utilisation among Australian women with back pain.

Key words: Medical health care, allied health care, physiotherapist, back pain, referral patterns