# Overuse injuries: Prevention and management for editors and indexers

Sarah JH Fletcher
Write Edit Index conference
May 2015

## Welcome

### Disclaimer

The information provided is correct to the best of the author's knowledge, but **no warranty as to its accuracy is given** and you should not act on the basis of its contents without taking appropriate independent advice.

The information is made available on the understanding that it does not constitute professional or expert advice.

You should **seek assistance from a health care professional** when interpreting this information and applying it to your individual circumstances. If you have any concerns about your health, consult your general practitioner.

Information provided in this session does not imply endorsement of third-party services or products.

- Case study
- What is occupational overuse syndrome?
- Causes and risk factors
- Warning signs
- Treatment and prevention
- Adjustments at work
  - Posture; workstation setup
- Self-care
  - Exercise
  - Self-massage
  - Mental health

## Who here has a diagnosed overuse injury?

Who suspects they might have one?

# Current state of OOS in publishing-related jobs

 Anecdotally: significant numbers of workers develop overuse injuries,

### **BUT**

 There's very little education for publishing students and new entrants to the industry.

### Aims of this session

- Encourage identification of workers at risk of occupational overuse injuries (OOS).
  - Refer to medical professionals for further investigation.
- Set out:
  - OOS prevention tips.
  - practical management strategies for those already dealing with an overuse injury.
- Provide a foundation for OOS education for new entrants to the publishing industry.

## Patient A: History

- Average typing 3–7+ hours per day since 1996.
- Stints as a professional transcriptionist.
- Began editorial duties in 2007.
  - Very long work days
  - Sometimes working 15+ hours at a stretch during difficult/high-pressure edits.
  - Intensive keyboard use.
  - Sedentary lifestyle.

### Patient A: Symptoms

Presented to GP in late 2012 with:

- Tingling, numbness, weakness, muscle spasms in both hands/arms
- Persistent pain that was getting gradually worse
- Difficulty sleeping.

## Patient A: Diagnosis

Referred to hand therapist.

Diagnosed with bilateral:

- Upper extremity overuse syndrome
- Carpal tunnel syndrome.

### Patient A: Treatment

- Rest
- Wrist braces
  - Full time at first
- Nerve-glide
   exercises as
   prescribed
- Postural and workspace adjustments

- Changes to type of work (according to keyboard intensity required)
- Lifestyle improvements
- Remedial massage.

### Patient A: Outcome

- Major improvement over six months following diagnosis.
- In management phase as of May 2015.
- Occasional relapses during particularly busy periods.

# Patient A (me)



## Overuse injuries

- Umbrella term for a cluster of related conditions that are caused by repetitive movements and awkward postures.
- Any setting factory, office, sport, etc.

# Occupational Overuse Syndrome (OOS)

- Subcategory of overuse injuries.
- Common to fingers, hands, wrists, elbows, shoulders, neck.
- Specifically associated with workplace computer use.

# What's the difference between OOS and RSI?

They are sometimes still used interchangeably, but:

- RSI is an older term, now considered a less helpful label.
- OOS is the currently preferred term in Australia.

### JARGON ALERT



### OOS can include...

Upper extremity overuse syndrome

- Carpal tunnel syndrome
- Tendonitis
- Tenosynovitis
- Thoracic outlet syndrome
- Etc.



## But what do all these terms mean??

- Outside the scope of this session.
- For our purposes, it's enough to know that they have certain features and causes in common.



### Who is at risk of OOS?



Anyone who performs a manual task that requires fast and repetitive movements

and/or working in fixed or awkward postures for long periods of time.

# The bad news... Editors, indexers a

Editors, indexers and writers (as well as allied professions) are at particular risk of OOS.

## Some good news

Early identification and treatment of OOS



### However:

Occupational overuse injuries develop over weeks, months and years.

They don't heal overnight.

## 005 prognosis

In general:

- Many people make a full recovery.
- Some people experience longer-term effects of varying severity.
  - Some of these may be able to manage their OOS by making changes to the way they work.

### EARLY IDENTIFICATION AND TREATMENT IMPROVE PROGNOSIS

## OOS prognosis

PREVENTION is preferable to treatment.

It is also more cost effective.

### Causes & risk factors

### Root Causes

- Working in one position for years.
- Millions of repetitions
- Work intensity
- 4. Aging and loss of tissue resilience
- Physiology and anatomy
- Ergonomics
- Personality

## The Causes of OOS: The Causes of OOS: The Cause o

Secondary Reaction Cious Legislation Records Reaction Research

- Compensation and overloading
- 13. Inflammation and swelling
- Abrasion and irritation
- Nerve entrapment
- Loss of sleep

2

### Ultimate Results

- 17. Pain
- Numbness
- Anxiety or depression

### Root Causes

Working in one position for years.

Millions of repetitions

Work intensity.

Aging and loss of tissue resilience

Physiology and anatomy

Ergonomics

Personality

### The Dangerous Feedback Loop

Initial Results

8. Fatigue

9. Slouching posture

10. Muscle tension

Chest compression

Secondary Results that Become Causes

12. Compensation and overloading

13. Inflammation and swelling

Abrasion and irritation

Nerve entrapment

16. Loss of sleep



### Ultimate Results

17. Pain

Numbness

Anxiety or depression.



### Complex causes mean that...

...prevention and management of OOS involve many elements.









## Risk factors



### Risk factors: workplace

- Intensity, duration and repetitiveness of manual tasks.
- Furniture and equipment that don't conform comfortably to your body.
  - Workstations that are too high, too low or too far away from your body.
- Tight deadlines that prevent you from taking sufficient breaks.
- Cold working environments.

## Risk factors: general

- Overall lack of movement (exercise)
- Lack of sleep
- Stress
- Poor diet

## Risk factors: general

- Physiology
  - Some bodies are more prone to developing OOS.
    - e.g. people with an unusually narrow carpal tunnel.
- Psychosocial factors
  - Personality traits, work culture, financial pressures, etc.

## Many non-work activities can exacerbate OOS

- Driving
- Preparing food
- Reading
- Smartphone and tablet use
- Playing musical instruments

- Cycling
- Videogaming
- Sewing, knitting, crochet
- Gardening
- Carpentry
- Racquet sports

and so on...

#### What to look out for

THIS NEXT SLIDE IS THE MOST IMPORTANT PART OF THE WHOLE SESSION







- Tingling
- Throbbing
- Numbness
- Pain, aching or tenderness
- Weakness, lack of endurance

- Muscle spasms/ cramping
- Swelling
- Clumsiness
- Disturbed sleep from the above.

# If you have any of these warning signs...



I recommend that you do so as soon as possible.

 If you work inhouse, talk to your manager and/or HR, too.

#### How OOS may progress

- 1. You notice symptoms while doing a particular task, but they go away when you stop the task (rest). This stage can last a couple of weeks, or longer.
- 2. Symptoms get worse and cause longer periods of pain. Longer rests are required to reduce symptoms.
- 3. Symptoms become constant. Resting has little to no effect on them.

# Some treatment options: medical and physio

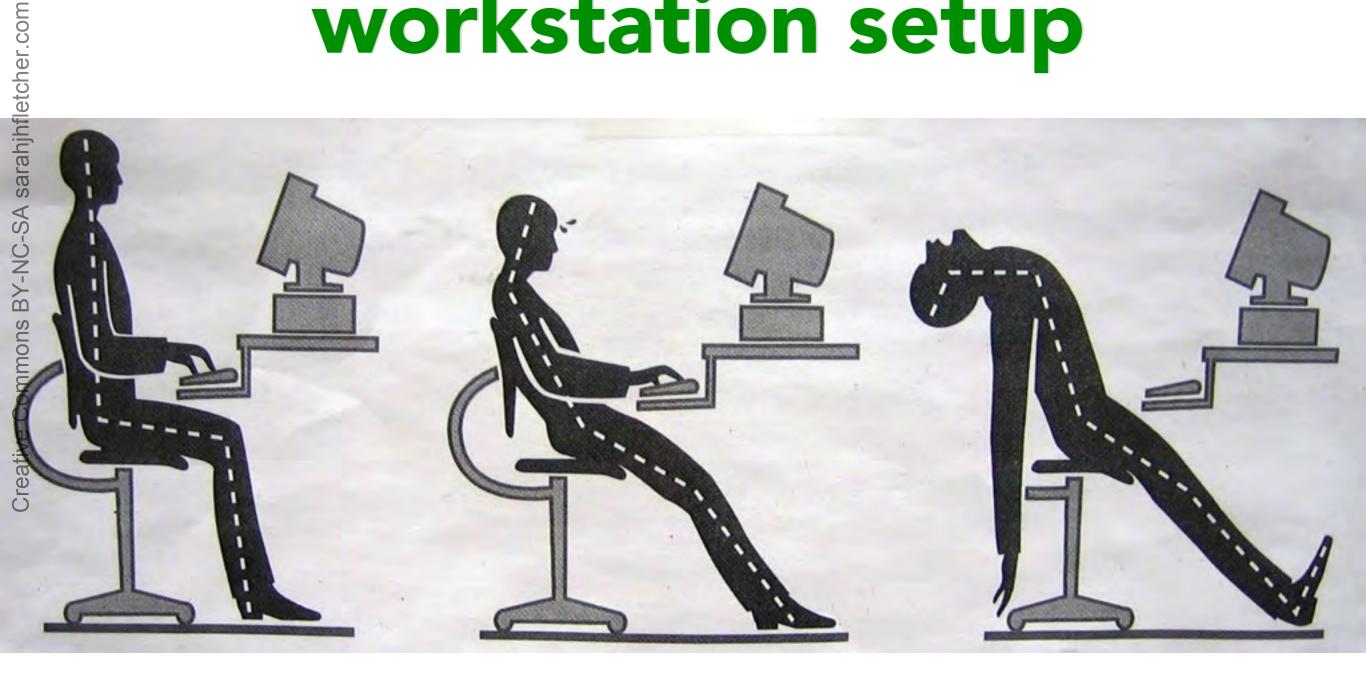
- Range of motion and mobility exercises
- Strengthening exercises
- Postural exercises with emphasis on scapular and core strengthening
- Nerve gliding activities

- Soft tissue mobilisation
- Massage
- Splinting
- Pain management
- Surgery (certain conditions only).

# Some treatment options: workplace

- Improved work techniques, including posture
- Improved work pacing and time management
- Use of adaptive equipment, including:
  - keyboards
  - pointing devices
  - furniture
  - speech recognition software.

# Posture & workstation setup



### Common problems

- Rounded spine
- Slumped shoulders
- Crossed legs
- Chin poking forward
- Feet unsupported.



flickr/sportEX journals

### Better seated posture



#### Work-based posture exercises



#### Work-based posture exercises

#### FLEXION AND EXTENSION OF SPINE

Make sure you are sitting on your sitting bones and then slump slowly forward rounding your back letting your shoulders tall fowards. Then slowly sit upright and gently push your chest and stomach forwards. Make sure not to extend too far that it causes pain. Repeat this exercise 6-6 times performing each motion slowly and with control.

SETS REP



#### TRUNK ROTATION

Cross your arms in front of your chest and keeping your whole body moving together as a unit, slowly rotate your trunk so you are looking over your shoulder Hold this position for 3-5 seconds and repeat on the other side. Try and make sure the amount of rotation is similar on both sides. Perform 5-6 rotations on each side.

SETS

PS



#### PLANTAR/DORSI FLEXION OF ANKLE

Shart forward so you are sitting on the edge of your seat. Extend one leg in front of you so that the knee is straight. Flex your toes so they are pointing towards the ceiling and then point them directly always of you. Repeat this movement 8-10 times on each leg.

SETS.

REPS.



#### SEATED HAMSTRING STRETCH

Maintaining the position from the above exercise put your hands on your hips or in your lap and bend forwards until you feel a stretch in the back of your leg, to increase the stretch point your toes towards the ceiling at the same time. Hold this stretch for 8-10 seconds and return to sitting. Repeat this stretch 5-6 times on each leg.

SETS.

REPS.



#### BUTTOCK STRETCH

Return to your normal seated position. Cross one knee over other knee and lean forward until you feel a stretch in your buttocks. Hold this stretch for 8 seconds before straightening your back again. Repeat this movement 5-6 times on each leg.

SETS

REPS



Standing workstation



## Standing desk options

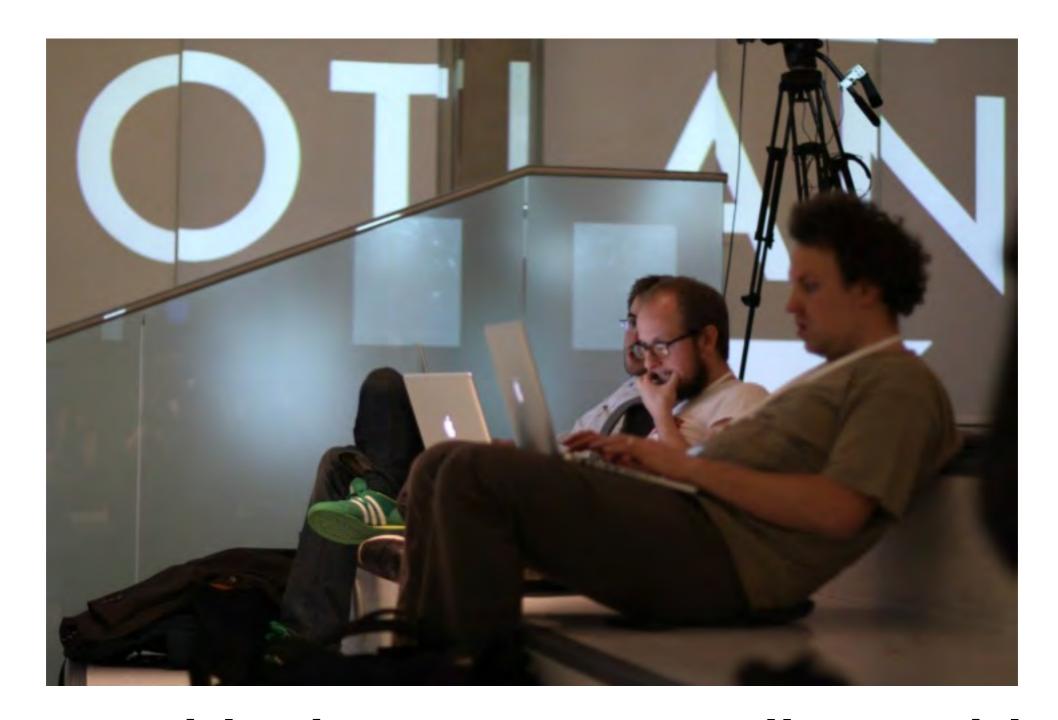
Excellent overview at The Wirecutter

http://thewirecutter.com/reviews/best-standing-desk/

## Moderation is key!

Standing all day can cause problems, too.

Start slowly and work up to a sitting-standing mix that works for you.



## Portable, but ergonomically terrible: The laptop problem



### Better laptop ergonomics

Use with an external keyboard and mouse wherever possible, so you can elevate the screen.



flickr/eptuna



Ergonomic solution: still pet-friendly



## Workspace changes

#### Overall ergonomic reassessment

Laptop + external display

Ergonomic keyboard

Ergonomic mouse



Sometimes standing to work

Phone headset

Specialised computer programs



## Key programs: RSI Guard

- Designed for management/avoidance of OOS.
- Monitors intensity of keyboard and mouse use.
- Dynamically adjusts break length/frequency.
- Suggests stretching exercises.

http://rsiguard.remedyinteractive.com/

Alternatives include Workrave and Stretch Break.

### Key programs: Text Expander

- Powerful: you set up short keyboard strings to automate tedious and repetitive typing.
  - E.g. ;nqr can become Not quite right consider rephrasing?
- In 2.5 years it has saved me 77,000 keystrokes.

https://smilesoftware.com/TextExpander/index.html



#### Another disclaimer

Talk to your doctor before starting any new exercise program, particularly if you think you might have OOS.

You may need input from a qualified professional – such as an exercise physiologist – to avoid injuring yourself further.

Be cautious about forms of exercise that may exacerbate OOS.

### Exercise

- Regular exercise forms an important part of overall health.
- Exercise doesn't provide an infallible safeguard against OOS, but if done safely, it can help you prevent or manage overuse injuries.

## Australian physical activity guidelines (adults)

- Doing any physical activity is better than doing none. If you currently do no physical activity, start by doing some, and gradually build up to the recommended amount.
- Be active on most, preferably all, days every week.
- Accumulate 150 to 300 minutes (2½ to 5 hours) of moderate intensity physical activity or 75 to 150 minutes (1¼ to 2½ hours) of vigorous intensity physical activity, or an equivalent combination of both moderate and vigorous activities, each week.
- Do muscle strengthening activities on at least 2 days each week.

#### Cardiovascular exercise

- Good for your overall health.
- Improves circulation, which can help counteract factors leading to OOS.

## Strength training

- OOS often involves posture imbalances caused by overcompensating for overtight or weak parts of the body.
- Strategic resistance training can improve both muscular strength and endurance, and help maintain good posture.
- E.g. weight training; body-weight exercises.

# Specialised OOS management exercises

- As prescribed by a medical professional, e.g. a physiotherapist.
- Nerve glides, etc.

#### Example:

http://www.askdoctorjo.com/content/neural-glidesulnar-median-radial-nerves

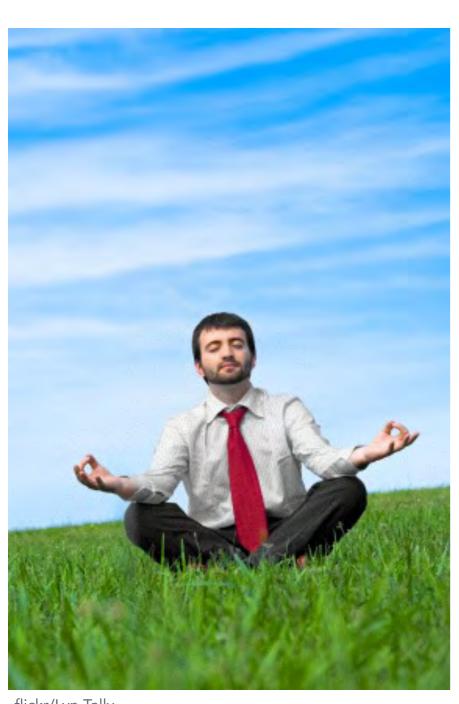
## Yoga and pilates

- Strength, flexibility, stress management.
- Won't suit everybody! But helpful for some.

NB: You'll probably need to modify certain asanas/exercises.

- Find a good teacher.
- Let them know about any pre-existing conditions before your first class.

#### Mindfulness meditation



flickr/Lyn Tally

- Body awareness can help posture.
- Stress management, breathing technique.
- Won't suit everybody! But helpful for some.

Lots of ways to get started, e.g. <u>headspace.com</u>



The amount of movement you do while going about your daily activities.

### Incidental exercise

#### Can help:

- offset the health risks of a sedentary, desk-bound job.
- prevent or manage OOS.

### Incidental exercise

#### While working:

- Take a short break every 20 minutes to get up and move around.
- Minimise long periods of sitting.

### Three-minute dance party

- 1. Find a relatively clear space.
- 2. Turn on your favourite upbeat song.
- 3. Dance until the song finishes.

(Bonus cardiovascular points for singing along.)

Suggested tracks:

Taylor Swift, 'Shake It Off'
Mark Ronson & Bruno Mars, 'Uptown Funk'
Dee-Lite, 'Groove Is In The Heart'
The Pointer Sisters, 'I'm So Excited'
James Brown, 'I Got You'.



# Incidental exercise: find out more

Australia's Physical Activity and Sedentary Behaviour Guidelines: **Tips and Ideas for Adults** (18–64 years)

Department of Health

http://www.health.gov.au/internet/main/ publishing.nsf/Content/ti-18-64years

### Cruel Irony

Having OOS can be **stressful** – emotionally, physically, financially.

But stress makes
it harder to
recover
from overuse
injuries.



### Self-care is important

Self-care is what people do for themselves to establish and maintain health, prevent and deal with illness.

#### It encompasses:

Hygiene	General and personal
Nutrition	Type and quality of food eaten
Lifestyle	Sporting activities, leisure, etc.
Environmental factors	Living conditions, social habits, etc.
Socioeconomic factors	Income level, cultural beliefs, etc.

#### Self-care for OOS

- Get enough sleep. (Most adults need approximately 7 hours of sleep per night for their bodies to rest and repair themselves.)
- Eat foods that make you feel good.
- Move your body in ways that make you feel good.
- Breathe deeply from the diaphragm, instead of shallowly from the top of the chest.

- Engage in relaxing leisure activities that don't exacerbate your OOS.
- Talk to supportive friends and family.
- Carry out regular self-massage (if you find it helpful).
- Do what you can to reduce financial, cultural and interpersonal pressures.
- Pursue medical help where necessary.

#### **OOS** and mental health

Having an overuse injury can be a painful and destabilising experience.

- Potential trigger or exacerbator of mental health issues such as depression.
- In some cases OOS may also be associated with harmful behaviours such as abuse of drugs (particularly painkillers) and/or alcohol.

If you are concerned that OOS is affecting your mood and/or quality of life, please seek qualified help as soon as possible.

Lifeline
13 11 14 <a href="https://www.lifeline.org.au">https://www.lifeline.org.au</a>

## Self-massage

- Cheap or free.
- Can be done on your schedule, wherever you like.

Consider using a self-massage tool to reduce strain on hands.

Use bodyweight where possible.

### Self-massage tools

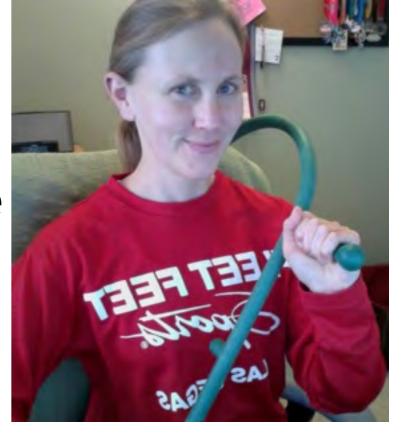


Tennis ball

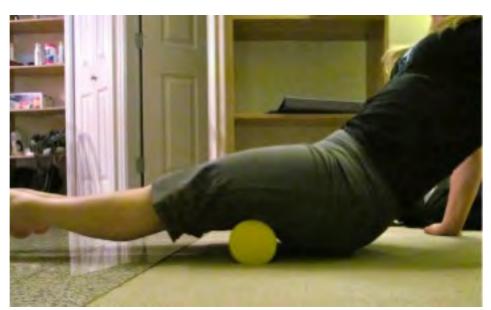
flickr/David Hawkins-Weeks

TheraCane

flickr/jow



Foam roller



Tiger Tail



#### Self-massage resources

Davies, Clair & Davies, Amber, The Trigger Point Therapy Workbook, 2nd ed., New Harbinger Publications, Oakland, 2004.

http://www.prevention.com/food/cook/healthy-recipes-runners-world-cookbook

### Suggested reading

Damany, Suparna & Bellis, Jack, It's Not Carpal Tunnel Syndrome! RSI Theory and Therapy for Computer Professionals, Simax, Philadelphia, 2000.

The shorter version: <a href="http://s91524683.onlinehome.us/rsi/articles/">http://s91524683.onlinehome.us/rsi/articles/</a>
<a href="Our\_Theory\_in\_a\_Nutshell.htm">Our\_Theory\_in\_a\_Nutshell.htm</a>

#### Select bibliography

Damany, Suparna & Bellis, Jack, It's Not Carpal Tunnel Syndrome! RSI Theory and Therapy for Computer Professionals, Simax, Philadelphia, 2000.

'Workplace Safety – Overuse Injuries', Better Health Channel, <a href="http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/">http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/</a> (Pages)/Workplace\_safety\_overuse\_injuries

National Code of Practice for the Prevention of Musculoskeletal Disorders from Performing Manual Tasks at Work, Office of the Australian Safety and Compensation Council, 2007, <a href="http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/274/">http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/274/</a>

NationalCodeOfPractice\_PreventionOfMusculoskeletalDisordersFromPerformingManualTasksAtWork\_2007\_PDF.pdf

Occupational Overuse Syndrome: Guidelines for Prevention and Management, Occupational Safety and Health Service of the Department of Labour (NZ), 1991, <a href="http://www.business.govt.nz/worksafe/information-guidance/all-guidance-items/occupational-overuse-syndrome-oos-guidelines-for-prevention-and-management/oos-prevention-guide.pdf">http://www.business.govt.nz/worksafe/information-guidance/all-guidance-items/occupational-overuse-syndrome-oos-guidelines-for-prevention-and-management/oos-prevention-guide.pdf</a>

Guidance Note for the Prevention of Occupational Overuse Syndrome, National Occupational Health and Safety Commission, 1996, <a href="http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/282/GuidanceNote\_PreventionofOccupationalOveruseSyndromeInKeyboardEmployment\_NOHSC3005-1996\_PDF.pdf">http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/282/GuidanceNote\_PreventionofOccupationalOveruseSyndromeInKeyboardEmployment\_NOHSC3005-1996\_PDF.pdf</a>

'Repetitive Strain Injury (RSI): What Is Good Treatment?', UCLA Ergonomics, <a href="http://ergonomics.ucla.edu/component/content/article/83-injuries-and-prevention/111-repetitive-strain-injury-rsi">http://ergonomics.ucla.edu/component/content/article/83-injuries-and-prevention/111-repetitive-strain-injury-rsi</a>

#### Aims of this session

- Encourage identification of workers at risk of occupational overuse injuries (OOS).
  - Refer to medical professionals for further investigation.
- Set out:
  - OOS prevention tips.
  - practical management strategies for those already dealing with an overuse injury.
- Provide a foundation for OOS education for new entrants to the publishing industry.



### Thanks

- Dr Ken Hazelton, for medical review. Any inaccuracies that remain are the author's own.
- Robyn Zampa, for suggesting additional lines of enquiry.
- Friends and colleagues who have shared their OOS experiences with me.
- The photographers credited thanks for licensing your work under Creative Commons.



#### Thanks for coming!

sjhfletcher@gmail.com sarahjhfletcher.com @sjhfletcher

