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## New low back pain in nurses: work activities, work stress and sedentary lifestyle

In " New Low Back Pain in Nurses: Work Activities, Work Stress and Sedentary Lifestyle," Yip (2003) investigates the prevalence of new low back pain (LBP) in nurses as it relates directly to amounts of physical work and psychological stress endured in healthcare settings. A 12-month prospective study was conducted using 144 nurses from six Hong Kong district hospitals, in which the participants completed face-to-face baseline interviews with telephone follow-up sessions. Questions in the study included demographic characteristics, work activities and stress, as well as physical leisure and the extent and occurrences of new low back pain. Self-reporting was also collected on work satisfaction and coworker relationships, as well as overall enjoyment of nursing.

The author found that nurses in Hong Kong commonly experience low back pain due to a number of factors, many of which were related to work environment. Moving and handling of equipment, frequent bending to perform physical tasks and stressful relationships with coworkers were reported to be significant contributors to new low back pain. Sedentary lifestyle and physical inactivity are found to not be conclusively related to occurrences of new LBP (Yip, p. 531). Numerous potential solutions to low back pain occurrences are suggested, including high-risk activity training and ergonomic assessment of awkward work postures. These preventative measures are theorized to effectively address newfound implications and environmental conditions conducive to work-related physical stress. The prevention of occupational back pain is stated to be of vital importance to the productivity and health of new nurses, and early assessment of ergonomic postures and work environment carries the potential to lessen occurrences of LBP.

Yip (2003) conducts a thorough and productive study on the subject of ergonomics in healthcare settings, and contributes significantly to existing literature on the topic. The author confirms existing assertions of previous literature through conclusions that nurses commonly experience LBP; that the aforementioned condition occurs as the result of common nursing activities (e. g. bending frequently, ergonomically awkward work postures); and that psychological stress in healthcare environments, as a result of poor coworker relationships, is an additional substantial factor (Yip, p. 438). This paper additionally supplies several new conclusions to the field of ergonomics in healthcare settings, supported by the results of this prospective study. The occurrence of new LBP is noted in new nurses to be significant and prevalent amongst a high proportion of healthcare employees. Conditions including recent employment to a ward, frequent bending and poor relationships are confirmed to be independent predictors of new LBP.

Noting the independent nature of common LBP predictors is significant in this study, as it demonstrates the need for multiple, interdisciplinary workplace prevention methods to address each contributing factor. Acknowledging psychological work factors that contribute to LBP is considered equally important to understand its causes more comprehensively. Aforementioned solutions to ergonomic issues in nursing, including training for high-risk activities, ergonomic assessment of work postures, and team-building and relaxation seminars, are suggested as effective measures to prevent new incidences. Implementing these steps into a formal ergonomics program in a healthcare setting increases the potential to dramatically reduce occurrences of new LBP in nurses (particularly those new to nursing wards), and thus increase efficiency and productivity.