

Happy New Year from DBC Malaysia

PERKESO recognises DBC Back, Neck & Shoulder Treatment Protocols

DBC Active Spine Care Protocols is now one of the benefits for all PERKESO Insured Persons suffering from back & neck disability. Beginning from January 2005, PERKESO Insured Persons that would like to undergo the DBC programme may request their doctors/specialists to refer them to the DBC Centres in Ampang (Plaza Ampang) and Ipoh.



PERKESO

The patient may undergo a 6-week or a 12-week programme depending on the severity of the cases. All patients must come in with a referral from their respective doctors. The DBC report will be sent back to the referring doctor and it is the doctor who will discharge the patient. DBC practices a very ethical approach that a doctor must play a major role in rehabilitation as to monitor the patients' progress together with our DBC physiotherapists.

We hope that we could continue to work closely with the orthopaedics/specialists/doctors on PERKESO patients that are suffering from back and neck problems. Just refer them with the simple DBC prescription form that is supplied to you and mark it with "PERKESO" and our DBC Centres would process the rest.

If you need more prescription pads or the procedures on SOCSO patient referrals, please contact:

DBC KL: **03 2144 1195**
DBC Ipoh: **05 545 1686**

PERKESO Medical & Rehab Dept:
03 4252 4475

What does the Cochrane Library tell us about back pain?

Cochrane Collaboration is an international organisation that publishes systematic reviews of the effects of health care interventions. These reviews are prepared an international collaborative group, whose members are researchers, healthcare professionals and consumers. The reviews are distributed by the Cochrane Library on CD-ROM and the internet (www.cochrane.org).

The documentation-based treatment programmes of DBC aim to comply with the conclusions from these evidence based reviews.



Targeted exercise for the Lumbar Thoracic area on the DBC Lumbar Lateral Flexion Device
Picture: courtesy of DBC Ireland

A search was made in the library for systematic reviews on interventions for low back pain. The follow is a brief summary of the research into some common interventions.

Non-steroidal anti-inflammatory drugs for LBP

Reviewers' conclusion: NSAIDs are effective for short-term symptomatic relief in patients with *acute LBP*. There does seem to be a specific type of NSAID which is clearly more effective than others. Sufficient evidence on *chronic LBP* is still lacking. (Van Tulder MW, Scholten RJPM, Koes BW, Deyo RA. Non-steroidal anti-inflammatory drugs for low back pain (Cochrane Review). In: *The Cochrane Library*, Issue 3, 2003. Oxford: Update Software)

Bed rest for acute LBP and sciatica

Reviewers' conclusion: Bed rest compared to advice to stay active will at best have small effects, and at worst might have small harmful effects on acute LBP *with or without sciatica*. 9HAGEN kb, Hilde G, Jamtvedt G, Winmen M. Bed rest for acute low back pain and sciatica (Cochrane Review). In: *The Cochrane Library*, Issue 3, 2003.)

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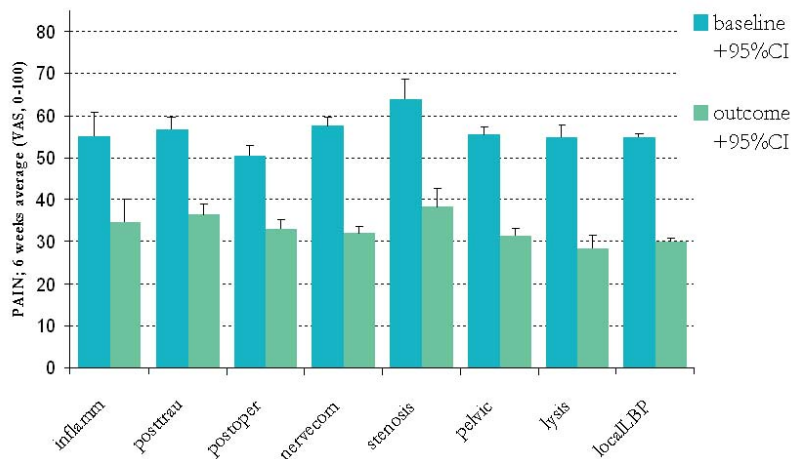
Rehabilitation after lumbar disc surgery

Reviewers' conclusion: There is no evidence that patients need to have their activities restricted after first time lumbar disc surgery. There is strong evidence for intensive exercise programme (at least if started about 4-6 weeks post operative) on short term for functional status and faster return to work and there is no evidence that they increase re-operation rate. (Ostelo RWJG, de Vet HCW, Waddell G, Kerckhoffs MR, Leffers P, van Tulder MW. Rehabilitation after lumbar disc surgery (Cochrane Review). In: *The Cochrane Library*, Issue 3, 2003.)

Multidisciplinary biopsychosocial rehabilitation for subacute LBP among working age adults

Reviewers' conclusion: There is moderate evidence of positive effectiveness of multidisciplinary rehabilitation for acute LBP and that a workplace visit increases effectiveness. (Karjalainen K, Malmivaara A, van Tulder M, Roine R, Jauhiainen M, Hurri H, Koes B. Multidisciplinary biopsychosocial rehabilitation for subacute low back pain among working age adults (Cochrane Review). In: *The Cochrane Library*, Issue 3, 2003.)

Quality Assurance in physiotherapy – is it possible?



DBC's exercise-based treatment programmes for back, neck & shoulder disorders are subject to international Quality Assurance every six months. This is unique in the area of physiotherapy and rehabilitation! How do we do it? Twice a year, each DBC centres around the world sends its baseline and outcome data to the R & D department of DBC International

in Finland for analysis. A detailed QA report is prepared for each centre in its respective countries to be benchmarked against each other. There are about 21 countries involved in the QA. In this way, DBC Centres are kept at its toes to be at par with the other centre worldwide.

Feel free to visit our DBC Centres at:

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 Jalan Tun Razak,
 50400 Kuala Lumpur.
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