



Australian Government

Comcare



CASE STUDY

WEBINAR:

Strategies to support work participation for clients/patients living with chronic pain

Patient background

Emma is a 32-year-old woman who was diagnosed with fibromyalgia 12-months ago. She has been working with her General Practitioner (GP) to develop a treatment plan to help reduce and manage her symptoms. She currently uses a combination of medication, therapies, and self-care strategies to help minimise her symptoms and improve her general health. Her symptoms vary in severity and tend to change from day to day.

Emma currently works full-time, 5 days a week (40 hours/week) as an experienced account manager for a retail company. In her role she is responsible for liaising with clients, creating and delivering national campaigns, and working with other teams to meet client expectations.

Home context

Emma is a single woman with minimal family support. She relocated from Mildura where her family lives to Melbourne for work 10 years ago. She has found the lack of family support difficult throughout the stressful period of diagnosis and management of her fibromyalgia symptoms. Emma currently lives alone and recently moved to an apartment closer to her office that offers amenities, such as a lift and pool, to make life easier.

Presenting symptoms

Emma first presented to her GP with persistent symptoms of musculoskeletal pain, issues sleeping, digestive problems, and troubles with concentration and memory. Emma had been experiencing these symptoms to varying degrees over several years. She was diagnosed with fibromyalgia following an 8-month period of investigation.

Emma's GP prescribes medication that helps reduce her pain and improve sleep, but some days it makes her tired and groggy. She is working with a specialist physiotherapist on strategies to manage pain and improve her wellbeing, such as water-based exercises to increase her strength, flexibility, and stamina. She tries to set aside enough time for sleep and rest; and is exploring changes to her diet to improve her overall mood.

Two months after her diagnosis, Emma's GP referred her to a psychologist following discussions regarding periods of emotional distress related to her ongoing pain and fatigue.

Emma's distress was compounded by financial worries from the use of her personal leave to manage her symptoms and concerns she may have to reduce her hours at work.

She has not disclosed her condition to her employer – and deciding whether she should and worrying about how they will react is another source of stress.

Her psychologist is currently helping her with psychological and behavioural strategies and tools to manage her pain and emotional symptoms.

Work participation

Emma is conscious of the impact her condition may have on her productivity at work. Although she feels her condition only has a minimal impact at present, the pain, fatigue and side-effects from her medication means she has been taking more time off than she has in the past. The unpredictable nature of her condition is prompting her to consider reducing her work schedule from full-time to part-time.

Disclosing her personal chronic condition to her employer was an initial challenge for Emma. She had reservations about how open they would be to adjustments or accommodations, particularly as the condition was non-work related. Emma felt her employer might be disinclined to provide any support outside of the legislated workers' compensation environment.

Four months after her diagnosis, Emma's work supervisor initiated a discussion to understand what may be impacting her attendance at work. Emma confides her diagnosis and the impact it is having on her ability to undertake her work. She relays her reservations about disclosing her condition and her concerns about what it might mean for her employment, given its non-work-related nature. Her supervisor takes the time to

understand her condition and the challenges she has been facing.

Upon the advice of her supervisor, an in-house rehabilitation manager is included in ongoing discussions to identify and understand what safe and suitable supports Emma may need in the workplace. The conversation includes the options available to Emma, including flexible work arrangements and changes to her physical work environment, having regard to the inherent requirements of her role.

Following agreement with her employer, Emma employs a range of strategies to maintain her productivity at work, including: working remotely; taking regular breaks; accessing flexible work hours (changing her start and finish times); working longer hours when feeling well; and adjusting her work routine (times and duties) to accommodate her day to day capacity.

Emma has regular check-ins with her GP, supervisor, and rehabilitation manager to review her supports and to raise any issues or concerns. The flexibility and support offered by her employer has been a huge relief to Emma. The strategies in place have enabled her to consistently manage her symptoms, remain at work more often, and use less of her personal leave (which has eased her financial concerns).