





21-27 October 2024

Work Well Everywhere

JOURNALIST NOTES



"NATIONAL WORKSPACE WEEK 2024 - JOURNALIST NOTES"

WORKSPACE WEEK 21–27 OCTOBER 2024 - Work Well Everywhere WorkSpace Health is EveryBODY's Business

National WorkSpace Week (21-27 October 2024) is the initiative of the Australian Chiropractors Association (ACA) dedicated to educating Australians about the importance of minimising workplace injuries so they can work well everywhere.

WorkSpace Week aligns with National Safe Work Month and is dedicated to the prevention and early intervention of work-related musculoskeletal disorders (WMSDs), Australia's most common workplace injury which also accounts for the majority (57%) of workers' compensation claims for serious injuries.

A range of inflammatory and degenerative conditions affecting the muscles, tendons, ligaments, joints, peripheral nerves and supporting blood vessels, WMSDs may be caused by a single workspace event, but commonly result from repeated harmful workspace activities over an extended period of time.

WorkSpace Week focusses on prevention, early intervention, non-surgical and drug-free treatments for WMSDs and other spinal health conditions caused by work-related stress, body stressing (lifting etc.), repetitive work and poorly set up workstations. These can lead to a range of spine-related symptoms including headaches, neck and back pain.

With WMSDs the leading Work Health and Safety (WHS) problem in Australia, both in frequency and cost; WorkSpace Week aims to inform Australians about the importance of prevention and early intervention to minimise deterioration, reduce the severity of musculoskeletal disorders and foster good spinal health habits to improve the overall health and wellbeing of working Australians.

Workers most at risk of acquiring a WMSD include community and personal service workers such as healthcare, aged care, childcare, NDIS and disability service workers. Tradies, labourers, technicians, drivers, and machinery operators, are also among those with the highest rates of physical work-related injuries while desk or computer users make up 10% of serious claims.

Around 7.3 million (29%) Australians live with chronic musculoskeletal disorders (MSDs) with an estimated direct health cost in 2021-2022 of \$14.7 billion – almost 10% of the total annual health budget. However, according to a Deloitte Access Economics report, the real cost to the Australian economy for WMSDs exceeds \$55 billion annually when lost productivity, absenteeism, direct health costs and reduced quality of life is factored in.

Through WorkSpace Week, the ACA aims to promote safe work practices and healthier workspaces for all workers at risk of spine-related injury and musculoskeletal conditions to help improve the spinal health and overall wellbeing of Australian workers in any setting.

Organisations aiming to improve the spinal health and wellbeing of their employees to minimise injuries, and reduce WMSD impacts on business should visit **workspaceweek.org.au** to download a range of free resources including instructional posters, factsheets and the **Straighten Up App**.

During national WorkSpace Week, Australians are encouraged to host a **#StraightenUpAustralia** exercise initiative to improve the spinal health so employees can *work well everywhere*.



ACA'S FREE PREVENTION & INTERVENTION RESOURCES - workspaceweek.org.au

Workers and employers can download all free WorkSpace Week resources from workspaceweek.org.au.

- Straighten Up app: An app featuring a 3-minute exercise program to help improve posture, stabilise core muscle groups and enhance users' overall health and wellbeing.
- Consult A Chiro Podcast: A resource that provides information on preventing and managing workrelated musculoskeletal disorders.
- Factsheets: Organisations can download ACA's free factsheets to help prevent WMSDs including, Sitting, Standing, Lifting/Bending and Headache Factsheets, the Ergonomic Checklist and the Stand Corrected Stretching Poster depicting exercises and instructions for safe lifting, carrying etc.

AUSTRALIANS MOST AT RISK OF WMSDs

- Working Australians who do a lot of physical work are among the highest percentage of Australians at risk of back pain because their work typically involves strenuous activities that strain the spine including lifting, repetitive actions such as bending, squatting or standing for extended periods – all can lead to musculoskeletal injuries causing back pain.
- Those most at risk include community and personal service workers such as healthcare, aged care, childcare, NDIS and disability service workers. Tradies, labourers, technicians, drivers, and machinery operators, are also among those with the highest rates of physical work-related injuries while desk or computer users make up 10% of serious claims.

THE AUSTRALIAN CHIROPRACTORS ASSOCIATION

Established in 1938, the Australian Chiropractors Association (ACA) is the peak body representing chiropractors. The ACA promotes the importance of maintaining spinal health to improve musculoskeletal health through non-invasive, drug-free spinal health and lifestyle advice to help Australians of all ages lead and maintain healthy lives.

The ACA is the premier association for chiropractic in Australia. With around 3,000 members, the ACA is Australia's largest chiropractic health body and has taken a leadership role in promoting the importance of maintaining a healthy spine to improve the overall health and wellbeing of every Australian. ACA develops and promotes professional standards for chiropractors, has invested \$2.2 million to advance research in musculoskeletal health, builds evidence-based practice for chiropractic healthcare and actively promotes the importance of spinal health through its annual flagship campaign, national Spinal Health Week.

Every week 400,000 chiropractic healthcare consultations are creating well-adjusted Australians. With so many Australians visiting a chiropractor every week, chiropractors play an important role in improving the spinal health of everyday Australians.

DRUG-FREE CHIROPRACTIC HEALTHCARE TREATS THE CAUSE OF WMSDs

Although pain medications may offer temporary relief from back pain, recent academic studies reveal that opioids, commonly prescribed for this purpose, do not benefit people with acute low back or neck pain (lasting up to 12 weeks), and have no positive role in treatment of chronic low back pain. What's more, opioids may cause serious side-affects and potential additional problems. While opioids may relieve LBP and neck pain in the short term, longer term outcomes are not improved with opioids.

ACA chiropractors are 5-year university educated healthcare professionals who effectively treat a wide range of musculoskeletal disorders including the causes of back pain and a range spinal health conditions. ACA chiropractors use specialised drug-free, evidence-based, non-surgical techniques including specific spinal adjustments to manage spinal health. They apply low-force intervention and use various manual therapies including soft tissue techniques while assessing lifestyle factors and providing relaxation methods to reduce reliance on medication and minimise stress caused by back pain. By treating the cause of back pain and not just the symptoms, chiropractic healthcare improves the overall health and wellbeing of Australians.



BACK PAIN & MUSCULOSKELETAL DISORDERS

What are back problems?

'Back problems' are mostly commonly musculoskeletal problems described as a range of problems related to the bones, joints, connective tissue, muscles and nerves of the back that can affect the neck (cervical spine), upper back (thoracic spine) and lower back (lumbar spine) as well as the sacrum and tailbone. Examples of back problems include back or spine pain (such as lower back pain, and sciatica), vertebrae and disc disorders (such as narrowing of the spinal canal, disc degeneration and disc bulge herniation), deforming disorders (such as scoliosis).

The causes of back pain

Back pain can come from the muscles, ligaments, discs and joints. Chiropractors have been successfully helping people with back pain for over 100 years, and understand much about the proper functioning of the spine, and the nervous system which runs through it.

Causative factors include trauma, heavy physical work, insufficient exercise, prolonged sitting, poor postural habits, being overweight and enduring mental stress. There can also be more systemic health conditions that contribute such as arthritic conditions, disc conditions and infection. Chiropractors are well-trained to recognise these situations.

Back pain caused from injuries

- Back injuries, especially to the lower back, are very common. Any injury to the back's bones, joints, connective tissue, muscles or nerves can cause pain and discomfort.
- Injuries can affect any part of the back, but most injuries happen in the lower back. Common injuries include sprains and strains, disk protrusion or fractured vertebrae.
- The injuries vary in seriousness depending on the cause of the injury and what damage is done

Common risk factors for 'Chronic Primary Low Back Pain'

- Heavy physical work
- Frequent twisting, bending or lifting
- Poor posture
- Weakness in back and abdominal muscles
- Sitting too long for example, sitting in an office environment
- Too little physical activity
- Being overweight

The impact of back pain on sufferers

Back pain is very common with one-in-six Australians reporting experiencing back problems which can impact both their physical and mental health. For many, back pain can arise suddenly (acute back pain) but typically improves or resolves within three to six weeks. However, recurrence is common, and some individuals may experience more persistent pain lasting beyond three months.

People experience low back pain in different ways. Most feel pain, stiffness and soreness or find it hard to turn or bend in certain directions. Some say the pain feels like a sharp pain while others report dull aches or spasms. With sciatica, the pain can travel down one or both of the legs. Some people with back pain may feel irritable or short-tempered. Others may worry about whether the pain will control their life, and some experience feelings of helplessness.

The impact on the mental health of sufferers - Back pain and depression

- It's common for people with back pain to feel distressed about their recovery.
- People with persistent back pain can develop fear of movement and activity (including work), worrying that it will make things worse or increase their pain.
- Living with persistent back pain may also lead to mood issues such as anxiety, irritability, frustration and depression.



THE BURDEN OF WMSDs IN AUSTRALIA - KEY FACTS

- Work-related injury and illness impacts workers and their families deeply and impacts employers.
- MSDs still account for the majority (57%) of workers' compensation claims for serious injuries.
- Around **7.3 million (29%) Australians** were estimated to be living with chronic MSDs with the prevalence unchanged since the previous survey in 2017-18 (AIHW June 2024).
- MSDs are ranked the third highest chronic disease in the Australian Burden of Disease Study (2023) before cardiovascular disease.
- ⊙ Direct health costs for MSDs: \$14.7 billion 9.8% of the total health expenditure budget (2021-2022)
- 58% of WMSD sufferers are of working age in peak income earning years (25-64)
- The real cost to the Australian economy for WMSDs exceeds \$55 billion annually when lost productivity, absenteeism, direct health costs and reduced quality of life for WMSD sufferers is factored in (MA, 2020-2021 & Deloitte Industries).
- MSDs account for the greatest proportion of persistent pain conditions (WHO, 2019).
- MSDs are the second largest contributor to disability worldwide, with low back pain being the single leading cause of disability globally (MA, 2020-2021).
- Back pain is usually as a result of a musculoskeletal disorder (MSD).
- The increase in musculoskeletal cases is projected to be 43% over the next two decades.
- Back problems can cause lost social and physical activity, concentration and work capacity and are a significant cause of disability and lost productivity with the economic burden on Australia, significant.
- International guidelines provide compelling evidence that opioids have a limited role in the management of acute back and neck pain and no role in managing chronic back pain.
- A University of Sydney study published in the Lancet medical journal (23 June 2023), found opioids (among the most commonly prescribed pain-relief for people with low back and neck pain) do not benefit people with 'acute' low back or neck pain (lasting up to 12 weeks) and can result in patients experiencing worse pain.
- Prescribing opioids for low back and neck pain can also cause harms ranging from common side effects including nausea, constipation, dizziness, dependency, misuse, poisoning and death (RACGP).
- Opioids should not be recommended for 'acute' low back pain or neck pain or chronic low back pain or neck pain (RACGP).
- A change in prescribing for low back pain and neck pain is urgently needed in Australia and globally to reduce opioid-related harm.
- Ohiropractic healthcare provides effective, low risk, drug-free treatment for back pain for all Australians regardless of their age, profession or lifestyle. This is particularly effective when combined with a holistic person-centred approach, addressing factors such as exercise and stress management.

AUSTRALIAN BUREAU OF STATISTICS

ABS - Work-Related Injuries 2021-22 - Key statistics

- 497,300 people had a work-related injury or illness with 34% requiring more than ten days off.
- Of the 497,300 people had a work-related injury or illness, 63% (311,100) of people who experienced a work-related injury or illness were working full-time and 32% (157,200) were shift workers.
- Only 1% of work-related injuries occurred while working from home.
- Most work-related injuries occurred in the workplace (91%).
- The most common cause of injury or illness was 'Lifting, pushing, pulling or bending' (24%).
- o 66% had time off as a result of the injury or illness.
- 31% received workers compensation for the injury or illness.
- More than half of the people who experienced a work-related injury or illness were men (58%). https://www.abs.gov.au/statistics/labour/earnings-and-working-conditions/work-related-injuries/latest-release#:~:text=In%202021%2D22%2C%203.9%25,3.1%25%20in%202021%2D22.



COSTS OF MSDs IN AUSTRALIA

A Deloitte Access Economics report commissioned by Musculoskeletal Health Australia found the rising cost of musculoskeletal conditions in Australia makes a case for why a proactive, strategic response is needed:

- \$55.1 billion cost to the Australian economy, including direct health costs, lost productivity and reduced quality of life (burden of disease).
- **6.1 million Australians are already affected**, of which 58% are of working age in peak income earning years (25-64 years).
- 43% growth in musculoskeletal cases is projected over the next two decades, including a surge in older Australians living with the conditions.

Musculoskeletal Australia - The rising cost of musculoskeletal conditions - https://muscha.org/a-problem-worth-solving/ Report Overview: APWS-PLS.pdf (muscha.org)

WORK-RELATED MUSCULOSKELETAL DISORDERS IN AUSTRALIA

Work-related Musculoskeletal Disorders in Australia 2019 - A report published by Safe Work Australia, and the Australian Work Health & Safety Strategy 2012–2022 identifies work-related musculoskeletal disorders (WMSDs) as the first of its six priority disorders (Safe Work Australia, 2018b) with a total of serious injury claims for traumatic joint/ligament and muscle/tendon injury exceeding 124,600.

- MSDs had substantial economic impacts at both societal and individual levels (Schofield et al., 2013).
- The subset 'back pain and problems' contributed 31% of Australia's MSD burden, and 17% of such cases have been attributed to occupational exposures and hazards (AIHW, 2017).
- Previous research has estimated "37 per cent of all back pain worldwide" is attributable to workplace hazards.
- For Australia's workforce, WMSDs continue as the leading WHS problem, both in frequency and cost, which in 2012–2013 totalled more than \$24 billion in direct health costs.
- MSDs may result from a single event, but more commonly arise from cumulative exposure to one or more hazards over an extended period (NHC, 2001); this data is not captured accurately in workers' compensation statistics.
- Systematic approaches to appropriate identification and management of all relevant hazards in the development of WMSDs are not being implemented in organisations.
 - www.safeworkaustralia.gov.au/system/files/documents/1912/work-related musculoskeletal disorders in australia 0.pdf

The health burden of musculoskeletal disorders on Australians

- Back pain is usually as a result of a musculoskeletal disorder (MSD).
- MSDs are the second largest contributor to disability worldwide, with low back pain being the single leading cause of disability globally (MA, 2020-2021).
- MSDs account for the greatest proportion of persistent pain conditions (WHO, 2019).
- Almost 1 in 3 (29%) Australians reported a musculoskeletal disorder in 2022, around 7.3 million people according to the Australian Institute of Health and Welfare (AIHW, 2024).

The impact of back problems resulting from WMSDs

- Back problems often lead to poorer quality of life, psychological distress, bodily pain, and disability.
- People with back problems had over double the rates of reporting 'fair' to 'poor' health (26%), 'moderate' to 'very severe' bodily pain (50%), and 'high' to 'very high' psychological distress (22%), compared with those without the condition.
- Back problems were the third leading cause of disease burden overall, accounting for 4.3% of Australia's total disease burden in 2023.
- Back problems contributed to 1,024 deaths or 4 deaths per 100,000 population in 2021 (0.6% of all deaths).



AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE (AIHW)

Chronic Musculoskeletal Conditions (17 June 2024) - Around 7.3 million (29%) people in Australia were estimated to be living with chronic musculoskeletal conditions, according to self-reported data in the 2022 Australian Bureau of Statistics (ABS) National Health Survey (NHS). Prevalence has not changed since the last survey in 2017–18.

Women reported the highest proportion of Australians living with MSDs with 30.8% of women compared to 26.8% of men. Of these people:

- 4.0 million (16%) were estimated to be living with back problems
- 3.7 million (15%) were estimated to be living with arthritis
- 854,000 (3.4%) were estimated to be living with osteoporosis or osteopenia (ABS 2023).

Modifiable risk factors contribute to burden: In 2018, 16% of the total burden (DALY) due to musculoskeletal conditions could be attributed to modifiable risk factors. These risk factors included:

- Weight: overweight and obesity, which contributed to 8.9% of the musculoskeletal burden, and 28% of the osteoarthritis burden
- WHS: occupational exposures and hazards, which contributed to 5.6% of the musculoskeletal burden, and 17% of the back problems burden
- Smoking: tobacco use, which contributed to 2% of the musculoskeletal burden (AIHW 2021a).
- For definitions and information on the burden of disease associated with these conditions, see *Australian Burden of disease Study 2023*.

Direct Health Costs of MSD in 2021-2022 \$14.7 Billion – 9.8% of total health expenditure budget.

- \$9.95B hospital costs (Public/Private inpatient and public outpatient) 67.5% of MSD costs
- \$3.31B primary care costs (GP, Allied health, PBS, Dental) 22.4% of MSD costs
- \$1.49B in referred costs (imaging, specialists) 6.4% of MSD costs

In 2020–21, musculoskeletal conditions accounted for:

- 22% (\$5.5 billion) of all private hospital service expenditure ranking first of all disease groups
- o 21% (\$943.7 million) of all medical imaging expenditure ranking second of all disease groups
- For more information, see Health system spending on disease and injury in Australia, 2020–21.

 $\underline{\text{https://www.aihw.gov.au/reports/chronic-musculoskeletal-conditions/musculoskeletal-conditions/contents/summary}}$

SAFEWORK NSW MSD PREVENTION PLAN 2024-2026

- MSDs are the most common injury and disease in NSW
- Body Stressing such as lifting, carrying and repetitive movements are a major contributing factor for WMSDs alongside falls on the same level
- 57% of all serious claims are for WMSDs (SIRA State Insurance Regulatory Authority)
- \$64,759 is the average cost of one serious WMSD claim between 2018-2023. A serious claim requires one or more weeks absence, averaged almost \$65k per claim between 2018-2023 (SIRA – State Insurance Regulatory Authority)
- Action Areas include raising awareness in the workplace about WMSDs and how they occur and building workplace capability to eliminate and reduce risks



SAFE WORK AUSTRALIA

Australian WHS Strategy 2023-2033 (June 2024)

Musculoskeletal conditions still account for the majority (57%) of workers' compensation claims for serious injuries. While their frequency has declined from 4.7 claims per million hours worked since 2007-08, to 3.4 claims per million hours worked in 2019-20, the reduction rate has slowed in recent years.

 Body-stressing, falls, slips and trips, and being hit by moving objects are the cause of most workplace injuries in Australia.

www.safeworkaustralia.gov.au/sites/default/files/2024-06/australian whs strategy 2022-32 june2024.pdf

WHS Statistics Australia 2024 (September 2024)

The most current data shows: https://data.safeworkaustralia.gov.au/insights/key-whs-stats-2024

Serious Claims by Most Common Mechanism, 2021-22p

- Body stressing 32.6% (the highest percentage causing musculoskeletal injuries)
 - o 41,600 claims 25,600 male and 15,900 female
- Falls, trips and slips 22%
 - o 28,100 claims 16,200 male and 28,100 female

Serious Claims Demographic

Those most likely to suffer a workplace injury are predominantly Australian men who are 22.8% more likely to make a serious workers' compensation claim than women.

- Male 77,400 (68.8%)
- Female 49,900 (39.2%)

Serious Claims by Age group, 2021-22p

- 55-65 years age group with the highest claims
- o 35-44 years age group with the lowest claim rate

Serious Claims by Occupation 2021-22p

The following four occupational groups accounted for over three quarters (77.7%) of serious claims in 2021-22p, despite representing only 38.2% of workers.

- Labourers (34,900)
- Community and personal service workers (27,500)
- Technicians and trades workers (20,000)
- Machinery operators and drivers (16,200)
- Professionals (office/desk workers) (13,900)
- Sales workers (4,200)

Serious Claims By Industry, 2021-22p

The following industries accounted for 25.3% of serious claims in 2021-22p despite representing only 14.6% of workers.

- 18.9% Health care and social assistance (24,100)
- 12.2% Constructions (15,600)
- 10.8% Manufacturing (13,800)
- 10.1% Public administration and safety (12,800)

The Serious claims frequency rate was highest for agriculture, forestry and fishing industry (10.9 serious claims per million hours worked), followed by construction (9.8), and public administration and safety (9.8). These industries accounted for 25.3% of serious claims in 2021-22p yet represent only 14.6% of workers.

Work-related Injury - Serious Claims by Nature 2021-22p

• The highest percentage of serious claims were due to injury at 66%

Serious Claims by Most Common Nature, 2021-22p

- 46,800 claims, 28,400 male (36.7% of male claims) and 18,300 female (36.7% of all female claims)
- 36.6% traumatic joint/ligament and muscle/tendon injuries were the most common serious claim
- 14.3% wounds, laceration, amputation and internal organ damage
- 13.7% musculoskeletal and connective tissue diseases
- 10.6% fractures



WHO GUIDELINE: Non-surgical management of chronic primary low back pain in adults in primary and community care settings.

https://www.who.int/publications/i/item/9789240081789

Overview

In December 2023, the World Health Organisation (WHO) published the first guideline released by the WHO aimed at addressing **Chronic Primary Low Back Pain** (CPLBP). The guideline is based on in-depth research and was written by a world-wide range of neuro-musculoskeletal health practitioners including chiropractors.

Optimising the clinical management of people with CPLBP is a current priority for WHO Member States.

Key Recommendations

WHO recommends non-surgical interventions in the treatment of CPLBP through an integrated, person-centred approach. This approach includes education programs that supports knowledge and self-care strategies; exercise programs; some physical therapies, such as (chiropractic) spinal manipulative therapy and massage; psychological therapies, such as cognitive behavioural therapy; and, in some cases, non-steroidal anti-inflammatory medicines. However, it's important to note that the common use of opioids and paracetamol prescribed to treat LBP is NOT recommended as these medications are largely ineffective in treating LBP and come with a range of associated risks.

SHOULD BACK PAIN BE TREATED WITH MEDICATION ALONE?

University of Sydney Study: Opioids ineffective for acute back/neck pain - June 2023

According to a study by the University of Sydney, in Australia (29.6.2023) published in the Lancet, around 40% of people with low back and neck pain who present to their GP and 70% of people with low back pain who visit a hospital emergency department are prescribed opioids such as oxycodone. The study, found opioids do not relieve 'acute' low back or neck pain and can result in patients experiencing worse pain. Prescribing opioids for low back and neck pain can also cause harms providing compelling evidence opioids have a limited role in managing acute low back and neck pain and should not be recommended in the treatment of acute low back pain or neck pain.

Paracetamol and the Therapeutic Goods Administration - 3 May 2023

The Australian Therapeutic Goods Administration (TGA) published its final decision to reduce the maximum size of packs for various paracetamol products to address overuse of paracetamol that can lead to liver injury and paracetamol overdose. The TGA restrictions to packaging will come into effect from 1.2.2025.

CHIROPRACTIC HEALTHCARE IN AUSTRALIA - THE FACTS

Chiropractors are 5-year university educated healthcare professionals

- Chiropractors are university degree qualified healthcare professionals who undergo five years of university study encompassing a double bachelor's degree that covers a breadth of health subjects including anatomy, physiology, radiology, diagnostic techniques, and clinical training.
- Chiropractic clinical training requires over 1,600 hours, including clinical placement treating hundreds of patients under the expert supervision of registered chiropractic healthcare professionals.
- Ohiropractors are recognised as primary healthcare service providers certified to diagnose and treat health ailments. With a primary focus on musculoskeletal health, often they can be the first point of contact within the healthcare system when a person encounters a musculoskeletal problem.
- Chiropractors offer a drug-free, hands-on approach to spinal healthcare with growing evidence supporting early referral and assessment of patients experiencing musculoskeletal pain to an appropriately qualified musculoskeletal clinician such as a chiropractor.
- Chiropractors use a patient-centred model of healthcare to provide a therapeutic approach incorporating a range of manual therapies to treat a range of MSDs including back pain.



Chiropractors are registered to practice and regulated under Australian law

- Ochiropractors are required to register with the Chiropractic Board of Australia under the Health Practitioner Regulation National Law. Board members are appointed by the Australian Workforce Ministerial Council. The Board's role is to regulate chiropractors in Australia under the National Registration and Accreditation Scheme with chiropractors one of 16 health professions in the National Scheme.
- As is the case for all healthcare service providers, Australian chiropractors are also regulated by the Federal Government's Australian Health Practitioner Regulation Agency (Ahpra) to ensure public trust and confidence in all health practitioners. Chiropractors are one of 16 health professions regulated by Ahpra including medical practitioners, nurses, pharmacists, paramedics, physiotherapists, psychologists, and dentists.
- All Australian registered chiropractors complete mandatory continuing education annually to maintain registration and practice as a, non-surgical spine care and musculoskeletal-allied healthcare professional.

ACA MEDIA SPOKESPERSONS - NATIONAL & ALL STATES & TERRITORIES

Dr David Cahill – President, Australian Chiropractors Association - National, NSW & Victoria ACA President, Dr David Cahill has been a registered, practicing chiropractor since 1991, in the Malvern East area since 1998. He loves helping people of all ages, from newborn babies and toddlers, to those in their more senior years. David has always been very active in post-graduate education, continually upskilling in many aspects of chiropractic. From 2016 to 2020 David was also the chiropractor for the Hawthorn Football Club. He enjoys taking care of the elite footballers, integrating his chiropractic care in a team with the other support disciplines, particularly physiotherapy. David's passion is to truly help people have transformative experiences through chiropractic, and to better explore their magnificent potential.

Dr Damian Kristof – Vice President, Australian Chiropractors Association - National, NSW & Victoria Nutritionist, Naturopath and Chiropractor, Dr Damian Kristof is a highly sought-after presenter and speaker in the Wellness industry. With over 20 years of experience, Damian's in-depth knowledge of the body, nervous system, food functions and responses coupled with his friendly and dynamic presenting style, has him in high demand. Focusing on food as key to unlocking optimal health and wellness, Damian presents in-depth facts and concepts that have never before been readily available to the public - offering all audiences from industry experts to the general public highly valuable content as he engages, educates and inspires audiences across the globe.

Dr Anthony Coxon – National & Victoria

Dr Anthony Coxon is a caring and respected chiropractor with 30 years' experience. In 2009, he completed Post Doctorate studies in Chiropractic Neurorehabilitation. This additional qualification gives Anthony skills in dealing with more complex cases, particularly patients that experience balance disorders and dizziness. He is the current Vice President of the Australian Chiropractors Association (ACA). In addition to running a busy practice, Anthony has also appeared on countless print, radio and television media spots including 'A Current Affair', 'Today Tonight', the 'Today Show' and the Evening news on all commercial television stations. Anthony sees daily how chiropractic care and a healthy lifestyle can bring vitality and wellbeing to his patients.

Dr Michelle Ronan - Victoria

Michelle has been a registered chiropractor since graduating from RMIT in 2005 and has practiced in the Albert Park area since 2010. Michelle's passion lies in helping people's bodies perform better to allow them to get more out of life, whether that be to enhance sports performance, rehabilitation of chronic conditions, during pregnancy or to support general health and wellbeing. Michelle loves helping people of all ages and stages of life on their health journey. Michelle previously sat on the Victorian branch of the CAA (now the Australian Chiropractors Association) and is currently completing a masters through RMIT.



Dr Kim Lie Jom - NSW

Dr Kim Lie Jom is a caring, dynamic and talented chiropractor with over 20 years' experience that has earned the respect and trust of his professional colleagues and patients alike. Kim's knowledge of chiropractic grew as did his interest within the profession. Paediatric chiropractic, sports chiropractic and the concept of wellness chiropractic are of particular interest to him. With three young children of his own he is very aware of how making healthy lifestyle choices from a young age will serve you later in life. He is passionate about chiropractic and feels that the profession has enormous health benefits to offer the community at large and his goal is to educate and adjust as many families as possible toward optimal health through natural chiropractic care.

Dr Billy Chow - South Australia

Dr Billy Chow graduated as a chiropractor from RMIT University in 1998. Since graduating he has had a varied and enriching career in private practice, on boards and in business. Dr Chow is passionate about educating and inspiring people to make better choices and to live happier and healthier lives. Dr Chow believes that being on the Spinal Research Board is an honour and allows him to give back to his profession through service and provides him an avenue to promote, fund and facilitate more research faster for the chiropractic profession.

Dr Ashley Dent – Tasmania

Dr Dent graduated from Macquarie University in Sydney in 2010 where he was awarded the Ed Devereaux Award for Services to the Student Body. He is active within the Australian Chiropractors Association at a state and national level chairing the public engagement committee and being a member of two other committees. He volunteers his time with St Vincent de Paul to bring chiropractic care to the homeless and vulnerable in Hobart. Dr Dent has a keen passion for helping people improve their long standing (chronic) back and neck pain and then progressing their spinal health through exercise and rehabilitation so that they are stronger and healthier than they've ever been.

Dr Adam Smith - Queensland

Dr Adam Smith (Chiropractor) has nearly 20 years' experience in family based chiropractic care. He has experience working in many communities around Australia and internationally, including regularly serving on committees that guide health policy on a state and Australian federal level, as well as in the UK.

With a special interest in family health and wellness, Dr Adam works with local community groups, charities, workplaces and schools to improve access to chiropractic care for those who want it. He believes that all Australians should have access to quality chiropractic services, so he is currently working with a group that is expanding chiropractic access in regional and rural areas of Australia across six states and territories.

Dr Joshua Tymms - Western Australia

Dr Joshua Tymms discovered chiropractic as a child and has been fascinated with its application ever since. He graduated from Murdoch University with a Double Degree in 2006 and is registered as a chiropractor. He finished his International Chiropractic Sports Science Diploma in 2007 and has worked at many international level sports events. He is studying a double masters in public health and business administration to help build skills in these areas.

Dr Ali Young - Western Australia

Dr Ali Young is a Chiropractor with over 20 years' experience working specifically with families, children and women. She has owned practices & worked in both Western Australia and Queensland, and loves taking care of those children that love that extra jolt of frivolity, playfulness and joy in their healthcare. She is an advocate for Working Mothers, with her book, Work. Mama. Life widely received upon its publication in 2022. She is a mother of two, and now works with women in her Holistic Health Business space, combining these two great loves with her chiropractic work. She is a sought after speaker, MC, and strategist for working mothers in the allied health space who both own businesses, & want to live large whilst avoiding burnout. She has written for most major newspapers around Australia, has a podcast "Work Mama Life" with nearly 20,000 downloads, and provides support in the online space for women and mothers. She has been a chiropractic patient since 15 years of age, and thinks there is no greater gift that providing the support families need to allow their health to shine.



REFERENCES

Australian Bureau of Statistics. (2023). Work-related injuries - People who experienced a work-related injury or illness, including type of injury, job details and work-related injury rates 2021-22 financial year: Published 15 February 2023, Accessed 28 July 2023: https://www.abs.gov.au/statistics/labour/earnings-and-working-conditions/work-related-injuries/latest-release#

Australian Institute Of Health and Welfare (AIHW)

www.aihw.gov.au/reports/chronic-musculoskeletal-conditions/musculoskeletal-conditions/contents/summary

Australian Institute of Health and Welfare: https://www.aihw.gov.au/reports/chronic-musculoskeletal-conditions/back-problems#common_back

Australian Burden Of Disease Study (14 Dec 2023) <u>Australian Burden of disease Study 2023</u> - Source: AIHW Database.

Better Health Channel: https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/back-pain

Driscoll T, Jacklyn G, Orchard J, et al, (2014). *The global burden of occupationally related low back pain: estimates from the Global Burden of Disease 2010 study* (The University of Sydney & Annals of the Rheumatic Diseases 2014;73:975-981). https://ard.bmj.com/content/annrheumdis/73/6/968.full.pdf

Health direct - Government Health: https://www.healthdirect.gov.au/back-injuries#searchGeneralResults

Musculoskeletal Australia. (2020). *Musculoskeletal Australia 2020–21 Pre-budget Submission*. Accessed 27 July 2023 https://treasury.gov.au/sites/default/files/2020-09/115786 MUSCULOSKELETAL AUSTRALIA.pdf

Musculoskeletal Australia. (2018). The rising cost of musculoskeletal conditions - https://muscha.org/a-problem-worth-solving/ and https://muscha.org/wp-content/uploads/2018/07/APWS-PLS.pdf Accessed 30 August 2024

Royal Australian College of General Practitioners — Opioids ineffective for acute low back or neck pain: Study https://www1.racgp.org.au/newsgp/clinical/opioids-ineffective-for-acute-low-back-or-neck-pai#:~:text=Prescribing%20opioids%20for%20low%20back,back%20pain%20or%20neck%20pain.

Safe Work Australia – Australian WHS Strategy 2023-2033 (June 2024) www.safeworkaustralia.gov.au/sites/default/files/2024-06/australian whs strategy 2022-32 june2024.pdf

Safe Work Australia - WHS Statistics Australia September 2024 https://data.safeworkaustralia.gov.au/insights/key-whs-stats-2024

Safe Work Australia. (2022). Safer, healthier, wealthier: The economic value of reducing work-related injuries and illnesses (Deloitte Access Economics October 2022 for Safe Work Australia), Accessed 28 July 2023. www.safeworkaustralia.gov.au/sites/default/files/2022-10/final_safer_healthier_wealthier_theeconomic_value_of_reducing_work-relatedinjuries_and_illnesses_summary_report%2002.pdf

Safe Work Australia. (2019). Work-related Musculoskeletal Disorders in Australia (Associate Professor Jodi Oakman, Dr Sam Clune and Dr Ruth Stuckey at the Centre for Ergonomics and Human Factors, La Trobe University). www.safeworkaustralia.gov.au/system/files/documents/1912/work-related musculoskeletal disorders in australia 0.pdf

Safework NSW MSD Prevention Plan 2024-2026

www.safework.nsw.gov.au/ data/assets/pdf file/0016/1303333/safework-nsw-musculoskeletal-disorder-prevention-plan-2024-2026.pdf

TGA decision to reduce paracetamol pack sizes www.tga.gov.au/news/media-releases/tga-makes-final-decision-reduce-paracetamol-pack-sizes

University of Sydney- Opioids ineffective for acute low back or neck pain: Study:

https://www1.racgp.org.au/newsgp/clinical/opioids-ineffective-for-acute-low-back-or-neck-pai#:~:text=and%20neck%20pain.-,Opioids%20are%20the%20one%20f%20the%20most%20prescribed%20pain%2Drelief,prescribed%20opioids%20such%20as%20oxycodone

World Health Organisation. (2023). Low back pain. Published 19 June 2023. Accessed 27 July 2023.

https://www.who.int/news-room/fact-sheets/detail/low-back-pain

World Health Organisation: https://www.who.int/news-room/fact-sheets/detail/musculoskeletal-conditions

WHO guideline for non-surgical management of chronic primary low back pain in adults in primary and community care settings. Geneva: World Health Organization; 2023. Licence: CC BY-NC-SA 3.0 IGO. https://www.who.int/publications/i/item/9789240081789 <a href="https://www

chronic-low-back-pain#:~:text=LBP%20affects%20life%20quality%20and,accumulate%20less%20wealth%20for%20retirement.