

The BioPsychoSocial Approach

The what? Yes it is a bit of a mouthful, and from now on we'll refer to it as the BPS approach.

Now, it is important because there is evidence to suggest that using the BPS approach is more effective at rehabilitating people that not, especially in those who have back pain and further research is being done to see if it is important in other types of condition, which we suspect it is.

So to break it down and explain it a bit:

The BPS approach is a "model" of working that suggests that:

- Biological
- Psychological and
- Social factors

all interact to play a part in the function of the human body, and can have an impact on the other elements in the system. Simply it recognises the body-mind relationship and the social context in which the person concerned lives and works and how these affect someone.

The model was first theorised in 1977 by a psychiatrist George Engel at the University of Rochester where he identified a need for a new medical model to replace the traditional Biomedical model. The Biomedical model suggests that every disease process can be explained by an underlying fault, pathology or injury in the body itself and that the psychological state or social situation of the individual is largely irrelevant. The medical model also then suggests that a treatment is aimed at curing the problem or alleviating the symptoms and implies that there is little that can be done by the individual to influence their own circumstances.

So what does each bit refer to?

Bio - there is always a need to identify as accurately as possible whether there is an actual physical problem that could be causing a person's pain. In terms of back pain, a clinical examination should be used to triage for serious spinal pathology or disease (red flags), and then when that is excluded, further assessment can be made, and suitable treatment and rehabilitation planned.

Psycho - These refer to the psychological factors that may be causing further pain or disability that may become disproportional to the biological findings. These factors are strongly linked with the social context, but basically include fear, psychological distress and anxiety, methods of coping, what people attribute their condition to, their previous experiences or beliefs.

Social - The parts of life that are influenced by others - work, family, our community and cultural beliefs, and the economic policy of the time.

Psychosocial factors are often referred to together and grouped under "flags" - in particular red and orange flags are biological flags, and yellow, blue and black flags are psychosocial flags (See a previous article for more information on Flags).

Why is the BPS so important for us to know about? A lot of research has been done into back pain as I mentioned, and what has been shown is that certain things predict whether someone will get better or not, and who is more likely to go on to develop long term absence and disability - which is what we would all like to avoid.

A number of predictors of poor outcome have been identified for back pain:

- belief that back pain is harmful or disabling
- avoiding movements or activity because of a fear that they will make the problem worse
- a tendency to low mood and withdrawal from social activities, depression
- expectation that passive treatment will cure and no participation is needed
- long term pain
- excessive pain behaviour (demonstrating pain even on simple tasks)
- negative coping strategies
- perceptions of job
- work relationships

These are the ones that are the most predictive of poor recovery but other factors can influence as well, but as you see most of these are psychosocial factors and not biological factors. I.e. there is not one diagnosis that will predict what the outcome will be.

To round off the topic, it sounds a bit of a hopeless case, because there are so many factors to consider, but the first step in the BPS approach is to recognise that all these factors may exist and influence the person and their behaviour and willingness to return to work. There are methods available to screen for Psychosocial factors that can help clinicians and managers to identify who is most at risk and where help should be targeted. That makes for better, more cost

effective use of resources, and reduces time lost waiting for things to be discovered and addressed. So, be aware of these factors and where necessary get extra help to assess whether they may be a factor in why someone has not been able to return to work.