



MEDICAL BENEFITS ESSENTIAL TO RELIEVE FINANCIAL STRESS OF SPINE INJURIES

Lower back pain is the most frequent cause of activity limitation in people younger than 45. With around half of the population expected to experience some form of back ache during their lives, it is critical to ensure that one has adequate medical aid or disability benefits in the case of chronic spinal injury.

Ahead of World Spine Day on Sunday, 16th of October 2011, Dr Dominique Stott, Executive: Medical Standards and Services at PPS, says back ache is one of the leading causes of absenteeism from work, as well as short and long term disability in the workplace. “Back pain should be taken seriously by an employer as it can be debilitating for the person concerned and is one of the biggest medical impacts on a business.”

Dr Stott says spinal problems can be caused either by a trauma-related incident, such as a fall, or poor posture when lifting heavy objects, or as a result of an inherent weakness in someone’s back. “The symptoms may take the form of lower back or neck ache, or pins and needles, numbness, or aching in the limbs. Due to the ongoing nature of the problem, it can subsequently lead to depression, anxiety and in extreme cases, overuse of pain medication, leading to kidney and stomach problems.”

She says that while treatment for spine-related health problems varies, it can prove extremely expensive if the patient does not have sufficient medical cover. “For the most common cause of back ache - muscle spasm or mechanical back pain - the treatment might only be very short periods of bed rest followed by physiotherapy and a course of pain killers.

However if the injury is due to something more serious such as a slipped disc, then traction in hospital - or in extreme cases, surgery - may be required. This would incur significant extra expense or time off work.”

Dr Stott says most insurance policies do not upfront exclude spine-related problems, so those who have good medical aid or disability benefits should be covered. “However, an existing back problem not declared at underwriting stage, could lead to a subsequent claim not being covered. Additionally, if there is a spine exclusion in a policy then a claim might not be paid.”

Dr Stott says approval of a claim will also depend on the type of insurance taken out. “For permanent occupational disability benefits the patient must be permanently and totally disabled from performing their occupation. If the insurance company believes this is not the case, the claim might be declined.

Additionally, if it appears that rehabilitation protocols or treatment measures are not being adhered to by the claimant, then a claim may also be declined.”

“Regarding temporary disability, if the insurer feels that the time claimed is too long for that condition, then further information may have to be requested and based on that a claim might be stopped.”

She says if the person’s occupation is deskbound then the insurer may take a different view of a claim than if the claimant is a physical worker, or is required to stand or lift heavy objects, as part of their normal occupation. For this reason if there is any change in someone’s occupation it is vital to notify the insurance company.

“It is vital that all South Africans, but especially those who may be susceptible to back pain or work in active occupations, to ensure that they are comprehensively covered against spine related health problems,” concludes Dr Stott.