

When it comes to a lasting career, ergonomics matters

Addressing the root causes of an aching back lifts more than the bottom line.

It's no surprise that the *International Journal of Dental Hygiene* finds that 64 to 93 percent of dental health providers experience musculoskeletal pain, with up to 60 percent of dentists describing back issues and 85 percent reporting neck pain. As long as dentists use poor posture and do too much reaching, bending and twisting in the treatment room, they are going to be working out kinks in their necks, back and shoulders, or worse.

Just ask San Diego-area dentist Dr. Keith Henderson, who blew through more than \$20,000 in less than a year on chiropractic treatment and massage therapy before deciding to address the root cause of his pain: how he sat during procedures and interacted with his equipment.



Bodily sacrifice

Dental professionals have heard the warnings, yet they still do whatever it takes to get their bodies into position. While toughing out the intensity and endurance of treating patients, the effort to relearn proper habits rarely gets the right amount of traction. Dentists would rather concede to pain, which seems to continue until the agony gets in the way of doing their best work, or when the injuries begin to affect their weekends.

“Exposure to repetition and exerting force leads to fatigue, discomfort and ultimately pain, which causes cumulative disorders (MSDs). And injuries can contribute to a long-term disability,” explains Ben Malone, a Certified Ergonomics Assessment Specialist (CEAS) and A-dec Regional Manager in Texas. “With all the available tools, information, and equipment options, there are alternative solutions that allow a dentist to work pain-free.”

Self-correction basics

Malone suggests fundamental self-correction as a first step: “My advice is to keep addressing the principles that prevent pain and strain injuries. For starters, examine posture and how you’re sitting.” Without symmetry across the shoulder line, Malone explains, the daily toll can create a slow burn into the upper back rhomboid area – up in the shoulder and in the cervical – or base of the neck and shoulder.

Creating better habits involves using indirect sight lines and sitting directly behind the patient, with the oral cavity close to your lap. The assistant’s setup and having the whole team working within a small radius is also an important factor.

“The point is to eliminate – or at least limit – reaching, twisting and bending,” says Malone. “We can get distracted by whether the pain was caused by an incident, a stress injury, or cumulative trauma disorder (CTD), but it’s more important that every practitioner keeps seeking ways to improve how he or she sits and interacts with the equipment and treatment area.”

As a certified ergonomist, Malone is able to observe and assess the doctor’s habits and explain better ergonomic positions and how to get the most out of the equipment. The common denominator is finding ways to keep the spine aligned with shoulders, and having elbows fall naturally to the sides. Consider, for instance, the ease in which we keep our arms close while texting on a smartphone.

Strategizing with well-designed equipment

“Keeping everything close is the ideal,” says Malone. “Every time the doctor leans forward, it causes muscle strain. Getting to the oral cavity, retracting tissue, and moving the neck – while concentrating on a very focused area – means having to work in an unhealthy position.”

Without thinking about it (and without a full understanding of how we expose ourselves to risk), it’s human nature to force our bodies to get the work done. “That’s the problem,” Malone says. “Instead, practitioners need the work to come to their body, which is why the right equipment is such a significant factor.”

Dr. Henderson couldn’t agree more. “Identifying the right equipment served as a catalyst,” says the dentist. “I used my new equipment to relearn patterns that would minimize muscle strain.”

With the help of Patterson, Dr. Henderson installed A-dec 500 chairs equipped with Continental delivery systems, and freed up space by transforming four operatories into three, a solution that created greater efficiency and flow. And by strategically configuring options from the A-dec Preference Collection, the entire dental team was able to work in a dramatically more comfortable and ergonomically conducive environment.

Knowledge for creating sustainable change

“In terms of knowing what a dentist goes through patient after patient, A-dec and Patterson were very helpful,” says Dr. Henderson.

With a history of looking out for the best interest of the doctor, A-dec has recently upped its support quotient by sponsoring each of its U.S. and Canadian territory managers for CEAS accreditation. Spearheaded by Malone, the advanced training means more than 60 A-dec personnel have earned a level of ergonomics mastery common among physical therapists. These are trained ergonomists who can provide OSHA-compliant ergonomics analysis and instruction, identify the anatomical areas susceptible to injuries, and differentiate the causes, signs and symptoms of musculoskeletal disorders, as well as help explain methods to control risk factors.

As partners, A-dec and Patterson are continuing to help doctors in ways that extend well beyond equipment.

“The changes I’ve made saved me,” says Dr. Henderson. “I felt I was a few years away from not being able to practice at all. If you don’t have your health, there is no way you can carry out life to its fullest.”

“As soon as doctors are disciplined about relearning habits and experience the benefits, they’re on their way,” says Malone. “They’re able to elevate their energy level, disposition, productivity, and quality of life. It’s really true: when it comes to a lasting career, ergonomics matters.”

