

Overview

Carpal tunnel syndrome (CTS) is a burden to workers and their families. Chronic conditions such as obesity, arthritis, and diabetes increase risk for CTS.

This study used administrative workers' compensation (WC) and unemployment insurance data to examine the effect of chronic conditions (comorbidities) on CTS claimants' ability to return to work and recover to their pre-injury level of earnings.

Regression modeling was used to measure the effect of chronic comorbidities on return to work, and the relative change in hours and earnings, for CTS claimants and claimants with upper extremity fractures (UEF) while controlling for claimant age, sex, industry, and surgical treatment.

The purpose of this study was to explore whether chronic comorbidities affected CTS claimants' ability to return to work, compared to UEF claimants.

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Research for Safe Work

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Chronic Conditions Affect Return to Work with Carpal Tunnel Syndrome

Research Findings

The Economic Effect of Chronic Comorbidities in Carpal Tunnel Syndrome Workers' Compensation Claimants, Washington State

Journal of Occupational and Environmental Medicine, 2018 Jennifer Marcum PhD; A McHugh MPH; MP Foley, MA; DA Adams, BA; DK Bonauto, MD, MPH

Key Findings

- Claimants with chronic comorbidities had higher odds of not working after their injury.
- More Carpal Tunnel Syndrome (CTS) claimants were diagnosed with chronic comorbidities than Upper Extremity Fractures (UEF) claimants.
- CTS claimants were more likely to drop out of the workforce than were UEF claimants.
 - o CTS claimants with two or more chronic comorbidities had the highest proportion of workers no longer working five years post-injury.
- Chronic comorbidities had a negative impact on economic recovery for those who continue working following either work-related CTS or UEF.
 - o The association of multiple chronic comorbidities with reduced earnings and work-hours appeared to be cumulative.

Impact

Workplace modifications to assist with successful return to work should accommodate both the underlying occupational injury and any chronic comorbidities. Consistent identification of chronic disease in injured workers is necessary to identify all potential barriers in return to work.

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