Occupational medicine: The yin complementing the yang?

In 1700 Dr Bernadino Ramazzini wrote *De Morbis Artificum Diatriba*, and he is often considered the father of modern occupational medicine. Despite being born, raised, and trained in Dr Ramazzini's home country of Italy, I cannot recall any of my 180 classmates ever mentioning or even considering occupational medicine *(Medicina del Lavoro)* as a career.

For some of us, occupational medicine may trigger immediate thoughts of tick boxes; forms, such as the F8, F11, and FAF; eternally incurable patients; opiate agreements; duplicate pads; ill-defined restrictions and limitations; ethereal case managers; and uncharted oceans of policies.

As I took an interest in occupational medicine and began my career as a WorkSafeBC medical advisor, one of my esteemed colleagues said to me, "so, you've switched over to the dark side." Because I valued her opinion, I engaged in constructive debate regarding our varying beliefs and experiences. She could not convince me that a dark side for occupational medicine existed.

After a number of similarly interesting discussions during my years in occupational medicine, I've come to describe the relationship between family medicine and occupational medicine as one of yin and yang—two aspects of medicine that complement and complete each other. This holistic view is in keeping with medical literature and common sense. After all, significant numbers of family medicine patients are also workers, and occupational illness and injury are not uncommon in our society. In addition, satisfying and gainful employment is considered to be a major determinant of good health. Conversely, poor working conditions and extended absence from employment increase the risk of prolonged disability and adverse health outcomes. A family physician with expertise in basic occupational health principles and practices is likely to promote patient-worker health.

Satisfying and gainful employment is considered to be a major determinant of good health.

I've developed a strong belief that basic occupational medicine principles and practices are imbricated with the core competencies of family medicine and need to be integrated into primary care physicians' day-to-day practice. If this were to take place, it would be essential to make academic teaching in occupational health a key objective in educational curricula.

The family physician's role as a generalist means catering to complex, multilevel occupational and environmental issues surrounding the patient-worker dyad. Additionally, the physician's role as gatekeeper in determining fitness for work and the return-to-work process engages the family physician longitudinally with the patient-worker, his or her family, the employer, WorkSafeBC staff and medical advisors, other allied care professionals, and a variety of therapists.

In Canada, family physicians offer the majority of occupational medical services, both in primary care and in more specialized areas. However, residency curricula generally provide little formal training in occupational medicine. Most commonly identified barriers include lack of clinical faculty, lack of available time for teaching occupational medicine in an already busy curriculum, lack of perceived need, and lack of interest among faculty and residents.

In reflecting on the yin-yang view toward medical practices, I am reminded of the complementary and mutually inclusive aspects of the well-known symbol *taijitu*. Assuming some perceive disability management or occupational medicine as the yin, or black side, it's clear to me that the dichotomy between yin and yang is only perceptual. In reality, medicine as a whole incorporates both the black and white sides.

I am enthusiastic to be part of the momentum toward integrating occupational medicine into family medicine. I look forward to more family physicians and more family medicine residency programs embracing a deeper understanding of occupational health and integrating it into their daily practice.

—Alfredo Tura, MD, CCFP
WorkSafeBC Medical Advisor

This article is the opinion of WorkSafeBC and has not been peer reviewed by the BCMJ *Editorial Board.*

Hold that date!

Saturday, 20 September 2014

WorkSafeBC Annual Physician Education Conference

Westin Bayshore • Vancouver, BC

www.worksafebcphysicians.com