

QUESTION & ANSWER: INJURY PREVENTION EXPERTS TALK TRUTH: DON'T IGNORE PAIN

BY JENN WOOLSON

To dig deeper into musculoskeletal injury prevention, we spoke with **David Bonauto, MD**, an occupational medicine physician who runs the Safety and Health Assessment and Research for Prevention (SHARP) program at the Washington State Department of Labor & Industries (L&I); and **Richard Goggins**, an ergonomist in charge of the FIIRE (Fire fighter Injury and Illness Reduction) Initiative, a program designed by L&I in partnership with the Washington Fire Chiefs and the Washington State Council of Fire Fighters to bring best practices into the fire service.

Q: What's a common misconception about musculoskeletal injury prevention?

Richard Goggins: One misconception is the idea that if you are strong enough and fit enough, you can lift heavy things in awkward positions and be safe. Certainly, being strong enough for the job is important. But there can be physical demands that go beyond where being a big strong individual is going to help you. Another reality of firefighting activities is that they can be really fatiguing. Once those really strong muscles get tired out, they're not protecting you anymore, so injuries are more likely to happen.

What can fire fighters do in those situations to avoid injury?

RG: One of the things we've been talking to the fire departments about is just taking a moment. Not everything you're doing is an emergency. If you're responding to a call, and it's not absolutely critical that you get the patient onto the stretcher right away, take a little time to make sure you're working safely. If needed, wait for more co-workers to show up to help.

What are some signs to watch for that might signal the early stages of an injury?

David Bonauto: The simplest advice is: Don't ignore pain. Recognize that, while pain may be transient, if it is persistent, that may indicate something a bit more problematic that you want to pay attention to. You shouldn't work through pain. You should recognize it and take care of yourself. Remember that sometimes problems with nerves manifest as numbness and tingling, so you don't want to ignore those symptoms either.

What's a good way for fire fighters to think about musculoskeletal injury prevention?

DB: The tasks of patient transport and lifting equipment, hoses or using tools, for example ... these are work activities fire fighters know they will be doing regularly. The key to injury prevention is breaking down each of those tasks, recognizing where the hazards are and then trying to proactively control those hazards.

Are there any special considerations older fire fighters need to consider in terms of injury prevention?

RG: As we age, we lose some of our more explosive types of strength. So that one-time heavy lift that fire fighters might have to do or picking up a heavy patient off the floor, those kinds of things become more of a strain on the body. Plus, you have the cumulative wear and tear that comes with a very physical job doing the same thing over and over again.

DB: On the other hand, older fire fighters have learned from their experiences and may be more likely to do things more efficiently and strategically. [Participating in Fire OPS] I experienced how incredibly significant the physical demands of the job are. Thankfully, there was a very experienced fire fighter who was my shadow, and from him I learned some tricks of the trade about how to do things a little more efficiently or a little more strategically, or using a little bit more leverage. A lot of that you don't read in a book. You learn it from your peers, who share this wisdom with you.

How can the FIIRE Initiative help departments with injury prevention?

RG: Fire departments that sign on with the FIIRE Initiative start by filling out a vulnerability assessment program survey. They get feedback on areas they should be focusing on and then we give them some risk-management training that walks them through that process of looking at your frequent activities, identifying where during those activities you have exposures and hazards, and then brainstorming solutions. All of that feeds into a safety improvement plan that addresses what the department will do in the coming year to address carcinogen exposures and musculoskeletal injuries. They submit that plan to us, then they can apply for a grant to purchase equipment to help with their safety improvement plan.