Working collaboratively to address the mental health of people experiencing

MHPN WEBINARS

CASE STUDY

Case Study - Gerry

Gerry is a 56-year-old storeman who has been married to Vanessa for 25 years. They have one son, Ben who lives with his girlfriend and their three-year-old boy. Gerry smokes half a pack of cigarettes a day and is on blood pressure and cholesterol tablets.

Six months ago, Gerry injured his back at work when a colleague dropped their end of a heavy carton that the two men were lifting into a vehicle. Gerry immediately experienced pain in his lower back which worsened over the next couple of days and started to radiate down the back of both of his legs.

That afternoon, Gerry hobbled off and saw his GP who ordered X-rays which showed osteoarthritis of the lumbar spine. His GP gave him anti-inflammatory medication and required him to modify his duties at work. Gerry's GP also sent him to a physiotherapist to have hands-on treatment. The physiotherapist told him to be very careful with lifting and bending and that he needs to avoid anything that hurts, or his back will be an ongoing problem. The physiotherapist also advised twice a week treatment for two to three weeks and encouraged him to seek a WorkCover claim as Gerry was worried about being able to afford treatment.

Gerry lodged a WorkCover claim but his supervisor was dismissive and told him to just turn up each day and sit on a hard metal bench doing nothing. Over the weeks, Gerry has felt that his supervisor ridiculed and belittled him. His pain has steadily worsened and began to radiate up his back and in to his neck. Gerry went back to his GP who took him off all work, prescribed him codeine and pregabalin and also referred him to a surgeon. The surgeon ordered an MRI that showed a disc prolapse, on which he quickly operated.

After the surgery, Gerry was no better and continued to have shooting pains into his feet and neck as well as strange pains around his surgical scar. Gerry has started seeking increasing amounts of codeine as well as benzodiazepines to "relax the spasms". He was re-referred to the physiotherapist where he again had hands-on treatment and was also given an exercise program. He was encouraged to walk 30 minutes per day regardless of his pain.



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SUPPORTING RESOURCES

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Gerry found that the treatment and exercises made his pain worse. As a result he only sporadically turns up to his physiotherapy appointments and he doesn't do the prescribed exercises. He now spends all day on the couch having log-rolled out of bed in the morning.

Recently, Gerry told his neighbour, John about his pain. John suggested he should try some cannabis to help him sleep and to help the pain. John also offered to share a few Endones. Gerry had not used cannabis for 30 years (since before he was married) but he thought "why not" and took his neighbour up on his offer of help.

Gerry's WorkCover claim is being challenged by his employer as they found footage online of him holding his three-year-old grandchild. In order to progress his claim, he's been told he needs to attend a multidisciplinary pain management program but he doesn't know what that involves and is becoming increasingly fearful of leaving the house.

Gerry's wife Vanessa is getting fed up with doing everything around the house while he's on the couch. He's put on 30 kilos - which Gerry attributes to an antidepressant that he's started taking.

In the last month, he's had to sell his house to cover the family's living costs and he and

Vanessa have moved in with their son and his girlfriend across the other side of town. He wants to find a new GP, "just for certificates and scripts, Doc".



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