Day 3: Friday, September 9, 2011

Poster-discussion: Methodology 2

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UNDERSTANDING HOW PHYSICIANS ALLOCATE CAUSATION IN POSSIBLY WORK-RELATED INJURY AND ILLNESS

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Objectives To identify the factors that influence a family physician's assessment of causation for compensation purposes in suspected work-related injury or illness.

Methods Four groups of family physicians with differing levels of prior reporting to the Workers' Compensation Board (zero, low, medium, and high) in Alberta, Canada, were sent four case scenarios and a series of questions related to these. For each scenario there were four different versions (SS, SW, WS, WW) with either strong or weak features suggesting work was an important cause or contributor, and either strong or weak features suggesting non-work causes or contributors. Responses to questions about causation were made on visual analogue scales.

Results The nature of the condition and the scenario type (ie, the information about workplace and non-workplace factors) were both associated with the physicians' opinions on causation. The physicians' understanding of the nature of work, the timing of symptoms, and the patients' implied opinion about work relatedness all appeared important in reaching a decision that a condition was work related, while the presence of other potential causes outside work seemed important in reaching a decision that a condition was not work-related. Prior reporting history of the physician was not strongly associated with opinions on work-relatedness.

Conclusions The characteristics of the scenario were more important in determining physicians' opinion about work-relatedness than the prior reporting characteristics of the physician, suggesting that it may be the case mix, rather than physician interest, that determines high or low rates of reporting.