In the News
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New Society Tackles Issues of Surgical Injury, Ergonomics

By Monica J. Smith

Surgery is a broad and dynamic specialty with an expansive roster of subspecialties. What’s one thing that unites them? Unfortunately, it’s work-related pain and injury. Now there is a professional society, the Society of Surgical Ergonomics (SSE), dedicated to enhancing the well-being of surgeons and other procedure-based specialists by promoting and advancing the scientific discipline of ergonomics.

“Surgery is going through a profound cultural and technological change, mainly driven by the business model of medicine that focuses on productivity and output. It’s such a rapid change that it’s hard to convince administrators that it’s about more than this month or even this year’s revenue. They have yet to learn (or accept) that if people get injured at work, it hurts productivity and output,” said Mary L. Brandt, a professor of surgery at Tulane Medical Center, in New Orleans, and senior author of “Working Through the Pain: Surgical Culture and Musculoskeletal Injury” (Curr Surg Rep 2021;9[18]. doi:10.1007/s40137-021-00295-5).
“A workplace should never be designed in such a way that preventable injuries happen, which is unfortunately the world that surgeons live in now,” Dr. Brandt said. “It’s important we tackle this problem together. Ergonomic injuries lead to tremendous pain and suffering, and also increase costs and directly impact patient care. That’s why I’ve been writing about this topic for a while, and why I was delighted to learn that like-minded surgeons took the next step and founded the Society of Surgical Ergonomics.”

Dr. Brandt joined the SSE shortly after learning about it on Twitter, which is where the nascent organization got its start in fall 2020. It began with a tweet chat when Geeta Lal, MD, MSc, mentioned an ergonomics curriculum she’d developed for residents after struggling with work-related pain herself.

“People started chiming in, saying, ‘You have an ergonomics curriculum? We should be talking about this,’” said Dr. Lal, an associate professor of surgery and pediatrics and an endocrine surgeon at the University of Iowa, in Iowa City, and the inaugural president of the SSE.

Before long, they had formed an interest group with surgeons and human factors and ergonomics specialists meeting monthly on Zoom. They developed a charter and pondered how best to advance their mission: Should they be part of another existing surgical society or form one of their own?

“We realized that ergonomics issues crossed surgical specialties and that if we wanted funding, we had to be our own entity,” Dr. Lal said.
Philip I. Haigh, MD, a clinical professor at the Kaiser Permanente Bernard J. Tyson School of Medicine, in Pasadena, CA, and the treasurer of the SSE, began researching how to set up a non-profit organization. It took a lot of form filing, but within about six months, the SSE was granted 501c(3) status.

Since then, the society has been having regular Zoom meetings and gaining members. The group is planning a virtual conference this September and an in-person conference in 2023.

“Going from an interest group to a society to a first conference usually takes four to five years. We’re moving at lightning speed,” Dr. Lal said.

**The First Step: Acknowledging There’s A Problem**

Presentations on ergonomics have become familiar components of surgical conferences, which suggests a ubiquitous need. But surgeons have often felt on their own coping with work-related pain and injury, reluctant to discuss their suffering with colleagues. Dr. Haigh struggled to overcome his own discomfort in asking fellow thyroid surgeons if they suffered from the same intense neck pain he experienced.

“It really wasn’t talked about 10 years ago. But I started asking people at meetings, ‘Do you have pain in your neck when you do thyroids?’ And so many people would say yes.”

Susan Hallbeck, PhD, PE, CPE, the Robert D. and Patricia E. Kern Scientific Director for and a professor of health care systems engineering at the Mayo Clinic Kern Center for the Science of Health Care Delivery in Rochester, Minn., and the president-elect of the SSE, has witnessed this reticence time and again in her 20 years’ experience with surgical ergonomics.

“When I gave talks at surgical societies, it wouldn’t be until someone, usually the president, said, ‘I’ve had three cervical
Tara Cohen, PhD, CHSE

laminectomies,’ and
then everyone else
acknowledges their own work-related injuries and surgeries. So many people just accept
this as the cost of doing business, but this is not OK,” Dr. Hallbeck said.

To Tara Cohen, PhD, CHSE, an associate professor and the director of surgical safety and
human factors research at Cedars-Sinai Medical Center, in Los Angeles, and the secretary
of the SSE, the personal and institutional acceptance of pain and injury in the workplace
runs counter to the fundamentals of physicians’ work: improving patient safety and well-
being as well as hospital efficiency.

“But how can we expect this if the people doing all the work are in pain or uncomfortable?
Just because you can stand in an awkward position for hours doesn’t mean the
environment should allow you to.“

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In the long run, the self-sacrifice many surgeons live with in order to help patients
sabotages their ability to do so. “A number of people have retired early because they’re in
too much pain to do their jobs. That’s a detriment to society, it’s a detriment to patients who
need to see them, and it’s a quality-of-life issue for surgeons,” Dr. Lal said. “No one should
have to leave the workforce before they’re ready.“

What It Will Take to Fix the Problem

The SSE is multispecialty and multidisciplinary, bringing together surgeons, human factors
researchers, occupational medicine experts, and physical and occupational therapists. The
society is open to physicians, nurses, physician assistants, scientists, and students and
trainees of these disciplines, which is rare for a surgical society. “We need a group of
multiprofessional individuals to work together to tackle this problem,” Dr. Cohen said.

But that raises the question: Pain and injury have been practically synonymous with surgery
since its inception. Can this problem be fixed?

“Yes. Is it something we can do in six months? No,” Dr. Hallbeck said.

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According to organizers, fixing the problem means changing the culture from one that
accepts pain as part of the job to one that challenges it. It means educating surgeons on
how to protect themselves from the demands of their profession. It means convincing
institutions that safeguarding the musculoskeletal health of their workforce is in their best
interest. It means working with industry to improve ergonomic design for all the hands that
hold their instruments.
“It’s going to take a lot of people and a lot of cooperation, but this is the first step,” Dr. Hallbeck noted. “We haven’t had a way to bring all the thought leaders together before, but now we are actually getting the right people together to make coordinated projects across different institutions, and this is how we’re going to move the ball forward.”

For more information, visit the SSE’s website at www.societyofsurgicalergonomics.org and follow it on Twitter @SurgErgoGroup.