







ADVISORY BOAF

Click on pictures to see credentials

































EDITOR'S NOTE

D'Arcy Little, MD, CCFP, FRCPC Medical Director, JCCC and www.healthplexus.net



am pleased to introduce the last issue of the Journal of Current Clinical Care for 2018!

Drs. Andrew Trenholm, Fred Xavier, and Sean Christie present *Upper Extremity Pain: Where's the Pathology—Neck or Shoulder?*. Neck and shoulder disorders are among the leading causes of pain and disability. History and physical examination are key components to clinical diagnosis and to determining whether the source of the arm pain is the neck or the shoulder. When consistent with the history, it is recommended to perform targeted provocative tests or manoeuvers. Several studies have shown that using a test item cluster improves diagnostic accuracy more than any single test item alone. Imaging, electrophysiological and laboratory studies are usually unnecessary unless there are clear clinical indications.

In their article, *Exercise Prescription for Back Pain*, **Dr. Eugene Wai, Denise C. Lawrence Wai, Susan Yungblut, R. Michael Galbraith, and Ted Findlay,** review exercise as one of the most effective and simplest evidence-based recommendations to manage acute and chronic back pain. Their article discusses the physiology and evidence to support exercise as effective treatment. Guidance on how to assess and prescribe exercise is provided along with methods to educate and encourage physical activity for patients with back pain.

Jessica Wong, Linda Carroll, and Pierre Côté, offer an article on *The Impact of Depressive Symptoms: Considerations for Clinicians Treating Patients with Low Back Pain*, A considerable proportion of patients with low back pain (LBP) experience depressive symptoms. A clinical case is used to highlight potential steps that clinicians can take to help manage depressive symptoms in these patients: 1) Assess for depressive symptoms using a valid and reliable questionnaire; 2) Provide education, reassurance, and self-management strategies to initiate the program of care; 3) Adjust care plans if patients also present with depressive symptoms (e.g., ongoing support and education); and 4) Provide ongoing assessment of depressive symptoms, and consider referrals to a specialist or other health care providers (e.g., counselors, clinical psychologists, or psychiatrists) for further evaluation if symptoms are worsening.

I hope you enjoy this latest edition. Enjoy the holiday season!