



Healthmatters Productive healthy ageing and MSK





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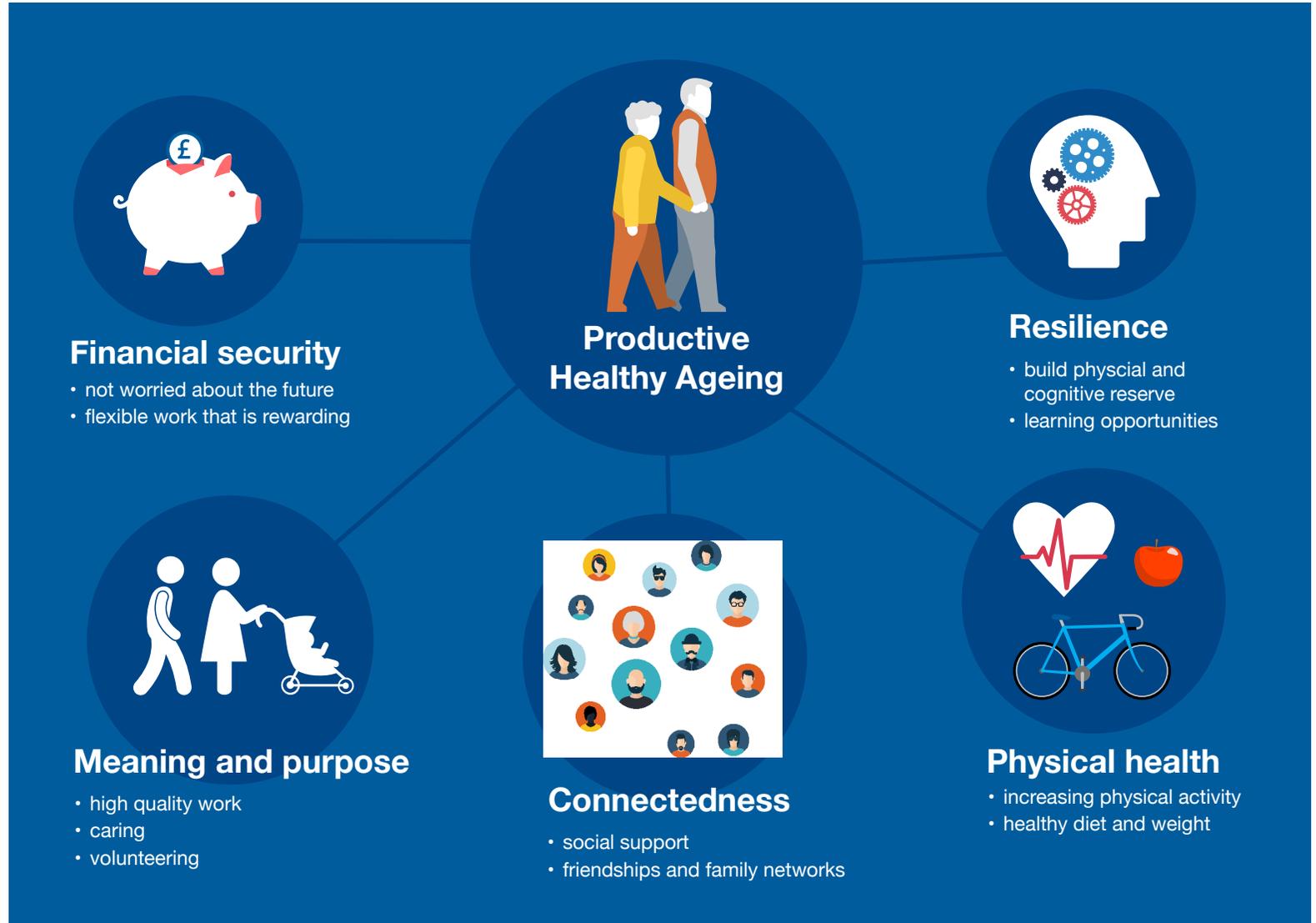
1. Longer healthier lives

There has been a steady increase in average life expectancy in the UK in recent decades.

This is a public health success story. Longer, healthier lives are a benefit to society in many ways, including financial, social and cultural, because older people have skills, knowledge and experience that benefit the wider population.

There is an opportunity to utilise this increased longevity as a resource, whilst challenging ageism. However, the opportunities available to each of us as we age will be dependent on one key characteristic: our health.

As life expectancy rises, we must promote the concept of productive healthy ageing.





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2. MSK conditions are a growing problem

The older a person is, the more likely they are to experience chronic diseases and disabilities such as poor musculoskeletal (MSK) health.

MSK conditions are problems of the bones, joints, muscles and spine, and are a common cause of severe long term pain and physical disability. MSK conditions include:

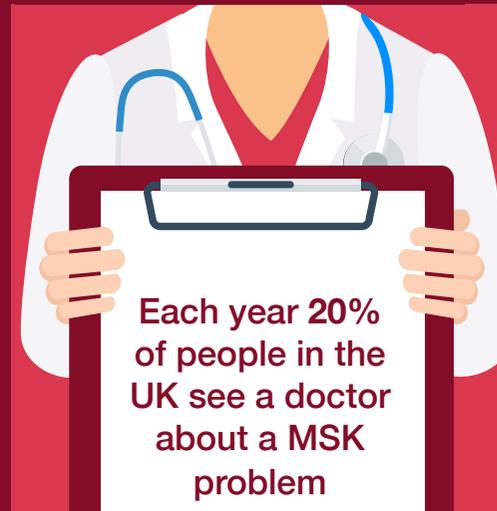
- lower back and neck pain
- osteoarthritis
- osteoporosis
- fractures
- spinal conditions

Lower back and neck pain were the leading causes of disability in England from 1990 to 2016.

Musculoskeletal conditions are a costly and growing problem



Prevalence of MSK conditions is being fuelled by our **ageing population** and rising levels of **physical inactivity** and **obesity**



The NHS in England spends **£5 billion each year** on treating MSK conditions



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3. The impact of MSK on productivity

The pain and disability of poor MSK health limits independence and the ability to participate in family, social and working life.

In 2016, MSK problems were the second most common cause of sickness absence, which accounted for 30.8 million days lost in work (22.4% of total sickness absence). This was only slightly surpassed by absence due to minor illness such as cough and colds, which accounted for 34 million days lost (24.8% of total sickness absence).

As well as being a big problem for individuals and employers, MSK conditions place a considerable strain on the NHS. They account for the third largest area of NHS spending with a programme budget of £4.7 billion in 2013 to 14.

Impact of MSK on productivity

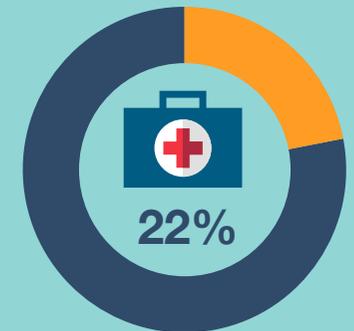
MSK 2nd biggest cause of days lost in work after cough and colds



In 2016,

over 30.8 million

working days are lost due to MSK conditions



that accounts for 22% of sickness absence

MSK conditions cost the UK an estimated

£ 7 billion a year



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4. Interventions for MSK prevention

Living for longer does not mean a lifetime of pain and ill-health, there are steps that we can take throughout our lives and particularly in our 40s and 50s to maintain productive healthy lives, reduce the risk of developing MSK conditions and better manage our health.

Health professionals and commissioners should encourage patients to make healthy behaviour changes such as:

- Being physically active
- Maintaining a healthy weight and balanced diet
- Stopping smoking
- Being socially connected through work, volunteering or hobbies

Effective interventions for MSK prevention

PHE's ROI tool shows that for every £1 invested...



The STarT Back (Stratified Risk Assessment and Care), for back pain saves up to £226.23 when days of work saved are also included



Self-referral to physiotherapy saves £98.54



ESCAPE-pain, for knee pain saves £5.20



PhysioDirect (Early telephone assessment and advice) saves £47.32 spent





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5. Call to Action

Longer, healthier lives can be a benefit to society, but this requires over-65s to be more active community and economic participants.

This edition of Health Matters outlines the actions that local authorities, commissioners, health professionals and others can take, and the tools to support them.

PHE's Musculoskeletal Diseases profile, for example, can help local authorities and commissioners to understand the health needs of their local populations and the number of people accessing services and the outcomes services deliver.

Commissioners



- commission training to improve the skills and competencies of the current and future workforce
- commission evidence-based interventions for people with specific MSK conditions



Voluntary Sector



- empower local communities and influence and shape policy decisions regarding MSK



Local Government



- support discussions between the wider public health workforce to promote a healthier ageing environment
- engage with local businesses to develop local workplace health standards



Royal Colleges and Associations



- provide pre and post-graduate education and professional development



Healthcare Professionals and Providers



- influence behaviour to improve MSK health as part of making every contact count (MECC)
- raising awareness of MSK key risk factors and interventions

