

The use of the mammography chair in reducing work related musculoskeletal disorders

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Background

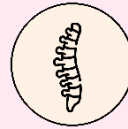
Conventional mammography technique requires the mammographer to move into awkward and strenuous positions with the patients standing throughout the procedure.

Repetitive movements adopted by the mammographer have been associated with work related musculoskeletal disorders (WRMSDs)(1), resulting in long term sickness. In this current climate with a shortage of mammographers, we need to ensure that we are looking after our staff's wellbeing.

Public Health England's 2018 publication, 'Breast screening mammography: ergonomics good practice' provides guidance for mammographic staff to adopt best practice to avoid or minimise harm from work related injuries (WRIs) (2).



Sitting patients down allows for the reduction in height difference between mammographer and patients. Eliminating the need for continually **tiptoeing and stretching**, highly benefitting staff of **shorter stature**.



Lateral manoeuvrability allows for easier small movements. Eliminating the need to move a wheelchair back and forth for optimal positioning. Reducing the **strain on the mammographer's spine and upper body**



The **back support** prompts the patient to sit upright. Allowing easier positioning for CC views without the mammographer having to **physically exert** themselves to lean the patient forward.



The **downward tilted seat** assists opening up the abdomen/hip angle. No longer requiring the mammographer to strain their **arms/shoulders** when positioning.



Good positioning of **foot brakes** on the back and either side of the chair, reduces the need for the mammographer **bending** as they can be easily applied with the foot.



The **foldable arm rests** allow better access for MLO views. Mammographers are able to position the detector at the correct height without using **strenuous movements** to modify positioning the breast, due to obstructive arms rests.



TAKE A SEAT

Conclusion

The use of the mammography chair brings many benefits to the mammographer and the patient, making it a desirable way of working. This innovative technique can be introduced into training to ensure that mammographers are aware of modifications that will help reduce WRMSD's, especially in a busy screening environment. Subsequently, allowing for a change to help avoid or minimise WRIs within mammographic staff, providing a solution to support the government's guidance (2).

REFERENCES

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