

# SPINE20 Recommendations to the G20

**Executive Summary**

*Rome -2021*



**Care for People's Health and Prosperity**



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# SPINE20 Recommendations to G20

## Rome, 2021

### RECOMMENDATIONS

SPINE20 calls upon the G20 countries to expand telehealth for the access to spine care, especially in light of the current situation with COVID-19.

SPINE20 calls upon the G20 countries to facilitate access and invest in the development of a competent rehabilitation workforce to reduce the burden of disability related to spine disorders.

SPINE20 calls upon the G20 countries to engage in capacity building with emerging countries and underserved communities for benefit of spine patients.

SPINE20 calls upon the G20 countries to adopt value-based interprofessional spine care as an approach to improve patient outcomes and reduce disability.

SPINE20 calls upon the G20 countries to adopt a strategy to promote daily physical activity and exercises among the elderly population to maintain an active and independent life with a healthy spine, particularly after COVID-19 pandemic.

SPINE20 calls upon the G20 countries to promote strategies to transfer evidence-based advances into patient benefit through effective implementation processes.

**Spine Care; Luxury or Necessity**

**Spine Rehabilitation Means Prosperity**

**Spine Health And Aging**

**Burden Underserved Communities**

**Achieving Effectiveness**

**Future Perspective Global**



**Care for People's Health and Prosperity**  
SPINE20 Recommendations to the  
G20 group  
Executive Summary

## Recommendations and rationale for SPINE20 2021:

On September 17 and 18, 2021, SPINE20 held its 2nd annual meeting in Rome, Italy with the theme “Spine Care for People’s Health and Prosperity.” Before the meeting, the SPINE20 Scientific Committee and Publication and Recommendation Committee created 6 proposed Recommendations including their rationale. These recommendations were uploaded to the SPINE20 website (<https://spine20.org/event/>) 10 days before the 2nd annual meeting and opened to the public for comments. Subsequently, the recommendations were discussed at the hybrid annual meeting September 18, 2021, allowing the participants to object and provide comments. Finally, 188 participants from 27 countries endorsed the proposals as our recommendations for SPINE20 2021. The final recommendations are listed below with their respective rationale. Recommendations acted upon by SPINE20 participating societies will be tracked and presented at the following year’s SPINE20 meeting in Indonesia where the next G20 summit will take place.

### A. Research and innovation, Access to care

#### Recommendation

SPINE20 calls upon the G20 countries to expand telehealth for the access to spine care, especially in light of the current situation with COVID-19.

#### Background

The COVID-19 pandemic has greatly affected life, health, and society worldwide. Though the emergent countermeasures, including home confinement and lockdowns, were effective to some extent in preventing the spread of COVID-19 in the community, the prolongation of these countermeasures is also negatively affecting many aspects of people’s lives, such as overall decreasing physical activity and daily exercise. In addition, due to the pandemic, patients with spinal disorders are experiencing delays in timely access to care.

#### Problem

Many patients with spinal disease have lost access to care, especially during the COVID-19 pandemic.

#### Potential solutions

SPINE20 calls upon the G20 countries to expand telehealth for spine care, especially due to the current ongoing situation with COVID-19.



**Many patients with spinal disease have lost access to care especially during the COVID-19 pandemic.**



By taking this measure, patients with spinal diseases can obtain timely advice towards alleviating pain and recognizing critical symptoms which need urgent care, and thus be treated in a timely manner. Telehealth has not been widely adopted in the diagnosis and treatment of spine disease. This might reflect the inherent limitations of telehealth visits for performing physical examinations and demonstrating rehabilitation instructions, but also reflects the previous restrictions on billing for telehealth visits, and the need for technical troubleshooting during telehealth visits. Although before COVID there was a lack of any strong impetus to change our approach to patient care, there is now a critical ongoing need to provide alternative means of evaluating and treating patients affected by the pandemic. *Hence, we strongly recommend that each G20 country urgently develop a system in to support telehealth in this COVID-19 era in order to ensure access to care for patients with spinal diseases.* We believe that economic evaluations of telehealth, including the resulting increased productivity of workers worldwide, will validate the benefits of telehealth spine care.



**Telehealth in COVID-19 era could ensure the access to care for patients with spinal disorders.**



## B. Value based care

### Recommendation

**SPINE20 calls upon the G20 countries to adopt value-based interprofessional spine care as an approach to improve patient outcomes and reduce disability.**

#### Background

Lower back pain affects 80 to 90% of the adult population in both industrialized and emerging countries. Evidence suggests that 30% of affected individuals experience some disability and loss of function. Prolonged pain leads to loss of function, loss of ability to work, poverty, and the loss of the ability to provide for oneself, one's family, and the community, and is often a primary cause for loss of quality-of-life.

#### Problem

Due to its high prevalence and chronicity, spinal diseases remain a leading cause of disability.

#### Potential solutions

SPINE20 calls upon the G20 countries to understand that effectiveness in spine care occurs when different specialists work together using evidence-based methods to prescribe the most effective and efficient care for any given patient. By utilizing the varied education and experience of professionals from different specialties, patients are the ultimate benefactors.



**Value-based spine care reduces costs and decreases disability for a more productive population.**



Spine Care providers include primary care physicians, surgeons, physiatrists, physical therapists, occupational therapists, chiropractors, pain management specialists, psychologists, psychiatrists, social workers, orthotists, assistive technologists, vocational counselors, peer counselors, and others who can all contribute key insights that will optimize comprehensive care for patients. Governments should encourage multi-specialty care by providing incentives or fair payment paradigms that bring multiple perspectives to bear on any given patient.

## C. Spinal disability, Access to care

### Recommendation

SPINE20 calls upon the G20 countries to facilitate access and invest in the development of a competent rehabilitation workforce to reduce the burden of disability related to spine disorders.

#### Background

The COVID-19 pandemic has led to unprecedented increase in unmet rehabilitation needs. Moreover, the prevalence of chronic spine pain and disability is likely to increase because of the growth in the number of individuals with “Long COVID” in which spine and bodily pain are frequently reported symptoms. Even if COVID is resolved, Low back and neck pain will continue to be the main causes of disability globally and this puts a great burden on the healthcare systems and economic welfare of our societies. However, most people who would benefit from rehabilitation for their back and neck pain cannot access these services because they are not available, are not affordable, or because of a lack of health care providers in their locality.

#### Problem:

Despite significant health expenditures, the global burden of disability related to spine pain continues to grow and the COVID-19 pandemic has amplified this problem.

#### Potential solutions:

SPINE20 calls upon the G20 countries to facilitate and invest in the development of a competent rehabilitation workforce to reduce the burden of disability related to spine pain. The health, well-being, and productivity of the population will benefit from:

1. Developing a rehabilitation workforce that can deliver high quality and value-based rehabilitation for people with spine pain;
2. Promoting the delivery of high quality and value-based rehabilitation for people with spine pain; and
3. Facilitating easy access to high quality and value-based rehabilitation aimed at returning injured workers to a productive life.



**The global burden of disability related to spine pain continues to grow.**



The government efforts should target the timely delivery of quality rehabilitation to these individuals to promote population prosperity. The delivery and accessibility of rehabilitation services (including return-to-work interventions) that are supported by high-quality evidence must be prioritized.

## D. Aging, prevention

### Recommendation

SPINE20 calls upon the G20 countries to adopt a strategy to promote daily physical activity and exercises among the elderly population to maintain an active and independent life with a healthy spine, particularly after COVID-19 pandemic.

#### Background:

The degenerative spinal diseases occurring later in adult life have a significant impact on lifestyle expectations and activities of the elderly population. In addition, osteoporotic vertebral fractures are major problems for the elderly population. These conditions effect the role of the elderly in their family, and also effect local economic productivity.

#### Problem

The social and financial burden placed upon local communities and on the G20 countries by spinal degenerative diseases and osteoporotic vertebral fractures in the elderly is significantly increasing.

#### Potential solutions

SPINE20 calls upon the G20 countries to adopt strategies to promote daily exercises among the elderly population to maintain an active and independent life with a healthy spine. Physical activity and exercises, proper nutrition, and a smoking-free lifestyle are proven to reduce the severity of osteoporosis and frailty of the trunk among the elderly, helping them to maintain the ability to ambulate and carry out daily activities. Education for health care practitioners on prevention strategies for the aging population and similar education for the elderly population are the best tools to prevent degenerative changes and osteoporotic fractures that often lead to severe symptoms and disability. Finally, a proper interprofessional treatment strategy for patients with osteoporosis and/or degenerative spinal diseases should be defined according to scientific evidence-based assessments and subject to human and financial long-term outcome and cost analysis.



**Daily exercises among the elderly population to maintain an active and independent life with a healthy spine**



## E. Capacity building, Education

### Recommendation

SPINE20 calls upon the G20 countries to engage in capacity building with emerging countries and underserved communities for benefit of spine patients.

#### Background

Spinal problems are among the most frequent causes of loss of function and disability. It is one of the major causes of significant loss of quality-of-life, especially in the underserved areas of the world. Ignorance, cultural and financial problems, and geographical and political impediments are essential factors which limit people's access to care and deserve to be considered and discussed in detail. It is crucial to understand the role of inadequate information and lack of awareness of the general public in preventing spinal diseases and spinal injuries.

#### Problem

There is a poor standard of spine-care in different parts of the world, especially in underserved areas or in emerging countries.

#### Potential solutions

SPINE20 calls upon the G20 countries to increase spine care capacity-building in emerging countries and in all underserved communities. To address the disproportionate distribution and access to optimal spine care, senior administrators and policymakers in developing and underserved countries need to network and create alliances with G20 countries, and need to adopt specific strategies based on the best clinical practices of countries with robust spine health care systems. Long-term, realistic, region-specific goals for the improvement of spine care need to be developed based on region-specific factors such as the local epidemiology, availability of resources, social beliefs, attitudes /mindset, and urban versus rural distribution of health services. Strategies to improve the standards of spine care also need to focus on cost-effective high-impact practices, locally relevant clinical guidelines, professional oversight, targeted education/professional training, organizational change, and dedicated research. More proactive collaboration and support from the G20 scientific communities, individually or in working groups, is needed to help build and promote autonomous local scientific bodies in underserved communities.



**There is poor standard of spine-care in different parts of the world, especially in underserved areas or emerging countries.**



## F. Implementation and Outcomes

### Recommendation

SPINE20 calls upon the G20 countries to promote strategies to transfer evidence-based advances into patient benefit through effective implementation processes.

#### Background

Proving the effectiveness of a clinical approach is not always enough to guarantee its adoption by health services and healthcare professionals. It has always been a challenge to find the best way to enhance the incorporation of evidence-based practices and thereby increase their public health impact. The lack of a common language, agreement on transformative goals, an embedded evaluation process, common plans, and a shared agenda, in addition to the mentality of 'short-termism', are some of the main obstacles to translating evidence-based scientific discoveries into widespread patient benefit.

#### Problem

It is said that evidence-based practices take an average of 17 years to be incorporated into routine general practice in health care, even though research constantly produces confirmed findings that can contribute to more effective and efficient healthcare.

#### Potential solutions

SPINE20 calls upon the G20 countries to promote strategies that enhance the translation of the evidence-based discoveries into patient benefit at a global level through effective implementation processes. Addressing the gaps between knowledge and practice with efficient strategies should be a policy priority. A range of strategies is available to overcome these gaps. Stakeholder engagement, effectiveness studies, research synthesis, and mathematical modeling are some of the methods used by implementation scientists to identify strategies to embed evidence-based interventions into clinical practice and public health programs. While there is insufficient evidence to adequately support the use of some guideline implementation strategies, such as traditional educational strategies and guideline dissemination in isolation, there is convincing evidence in favor of the use of multifaceted interventions, interactive education, and clinical reminder systems for the effective implementation of clinical guidelines. Furthermore, one of the most important aspects of the implementation process is the economic evaluation.



Proving the effectiveness of a clinical approach is not always enough to guarantee its adoption.



It is a crucial tool that needs to always be incorporated into the implementation decision process for any adopted strategy. We need to further promote research on the costs and cost–benefit analysis of guideline implementation strategies, along with the other environmental, organization, and individual clinician factors that are associated with effective implementation strategies.

## Conclusions

SPINE20 is created as an advocacy group for governments, institutions, and other organizations to highlight evidence and valued-based spine care which can help prevent disability. Its recommendations are intended to reduce the burden of disease related to spinal disorders by engaging governing stakeholders in the development of evidence-based policies.



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