

#### Dr Brian Hsu MBBS MMed FRACS(Orth) FAOrthA, FHKAM Adult & Paediatric Spine Surgeon

Dr Bhisham Singh MBBS MS FRCS(Eng) FRACS Orthopaedic Spine Surgeon

# newsletter

At NSW Spine Specialists, Dr Brian Hsu and Dr Bhisham Singh care for Orthopaedic spinal conditions in both adults and children.

We have clinics at Bella Vista, Chatswood, Liverpool, Campbelltown, Penrith, Macquarie University Hospital and Taree.

#### Our Doctors perform surgery at:

- North Shore Private Hospital
- Norwest Private Hospital
- Westmead Private Hospital
- Macquarie University Hospital
- Westmead Children's Hospital

### Q&A with Dr Brian Hsu

Dr Hsu received his medical degree from the University of Sydney before obtaining his qualifications as an Orthopaedic Surgeon in NSW. Following his orthopaedic training, he spent 18 months in the USA completing further specialised training in all aspects of spine surgery.

Dr Hsu has been caring for patients with spinal disorders for over 10 years in NSW and is one of the leading deformity surgeons in Australia.

### What are the most common reasons patients come to see you?

The most common reason I see patients is for neck or back problems that are not improving. There was a time when everyone who had a twinge of pain was referred but these days first line treatment guidelines are well disseminated and practiced by health practitioners. I now see more patients with persistent problems, neurological symptoms and scoliosis.

### Is it a presumption that patients who come to see you will eventually have spine surgery?

Some patients do come with that expectation. When you have had symptoms for a while and you are going to see a surgeon that would be a reasonable assumption. However, only one in 6 patients we see end up needing surgery and most of our other patients get better with different treatment.



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### Q&A with Dr Bhisham Singh

In 2016 Dr Bhisham Singh joined Dr Hsu's Sydney practice. Prior to joining NSW Spine Specialists he completed 10 years of advanced surgical training in orthopaedic surgery in both the UK and India.

Dr Singh came to Australia in 2011 as Dr Hsu's Spine Fellow at the Children's Hospital at Westmead Hospital and was awarded the fellowship of the Royal Australasian College of Surgeons in 2015.

#### Why do we get back pain?

80% of the adult population will develop a significant episode of back pain at some stage during their lifetime. Fortunately most of these episodes are self-limited and improve spontaneously without treatment. Approximately 10-20% will have recurrent episodes of pain and some will develop significant chronic back pain symptoms.

Acute back pain from muscle strain and soft tissue tears heal spontaneously. Out of the small proportion of the population who do get recurrent or chronic pain, the most common underlying reason is degeneration of the supportive tissues of the spine, such as the disc, ligaments, and so on. Acute back strain, lack of exercise, poor flexibility, poor posture and smoking tend to aggravate the underlying conditions and cause symptoms. Symptoms may be mechanical, related to the stability of the spine, or neurogenic because of involvement of the nerves, or due to a combination of both mechanical and neurogenic causes. Uncommon causes of back pain include trauma, infection and tumours.



#### When is spine surgery required?

Surgery is contemplated when it becomes necessary to relieve neurogenic pain by decompressing the nerves and to relieve mechanical pain by correcting or stabilising the spine and placing hardware into the bony elements. Our surgeries are often a combination of these two procedures.

## Our Practice Nurses

NSW Spine Specialists employs nurses as part of our clinical team, whom you may meet at our clinics or when on hospital rounds.

Emma is the Manager of Clinical Services, Maria and Rebecca are Practice Nurses and Amanda is our Surgery Bookings Nurse.

Our nurses are clinical experts and are often the first point of contact between patients and the surgeons.



#### What's your typical day?

Maria: My typical day at work involves leaving home early in the morning to see the patients in the hospitals on ward rounds. I spend as much time as necessary with them to see how they are feeling, and make sure that everything is going well.

I then liaise with Dr Hsu and Dr Singh and other members of the clinical team. Proper documentation from the ward rounds is essential in order for the rest of the team to be informed as to how the patients are progressing on the ward. We all work together in order to provide optimal care to our patients.

I then return to the office to phone our postoperative patients, checking up on them and making sure that they are coping well either in rehab after their surgery or at home. I am also involved in the Doctor's clinics where as the Practice Nurse I see all the new patients and do their observations, height & weight and check their imaging and paperwork. I also give education to any patients who might be having surgery in the near future, or who are having a test or procedure.

Sometimes my job is just to provide further information and reassure patients of their treatment options.

### How do you feel you contribute to our patients experience at NSW SS?

We are here to make sure that our patients are not only happy with their experience dealing with our practice, but also that they are well and safe.

We care for our patients holistically. I make sure that they understand what is happening to them and what to expect from surgery or other investigations. I educate them and answer their questions as much as I can. The nursing staff are on-call 24/7, therefore we are easily reached especially if emergencies arise.

The practice nurses call the patients a week after their clinic appointment to answer any further questions and to make sure that they have understood the instructions from our Doctors.

#### What's the best part of working at NSW SS?

Our amazing team! Each one has a unique role to play but everyone is eager to help one another when needed in order to provide the best quality of care for our patients.

### Exercise Physiologists (EP's)

Taylor and Chris are our Exercise Physiologists. We asked them some questions to get a better idea of what an Exercise Physiologist does and why Dr Hsu and Dr Singh believe they can be an integral part of the patient rehabilitation experience.



Taylor completed her studies at the University of Sydney, where she underwent an undergraduate of Applied Science and Exercise Physiology.

Chris completed an undergraduate of Sport and Exercise Science at The Australian Catholic University. He then went on to further study with a Masters of Clinical Exercise Physiology.

To become an Accredited Exercise Physiologist you need to be qualified by Exercise and Sports

Science Australia, which is the governing body of tertiary trained exercise and sport science practitioners. This requires a minimum 4 years university degree inclusive of 500 hours of work experience to be qualified. Accredited Exercise Physiologists must also maintain their qualification through ongoing education, seminars and first aid courses.

### Chris, what's the difference between an EP and a Physio?

The major difference between Exercise Physiology and Physiotherapy is the nature of treatment.

Physiotherapy is a more passive based treatment in which the therapist is more 'hands on' with the patient. Physiotherapist's also tend to specialise more with the acute stage of an injury/pathology or surgical recovery, to reduce acute symptoms and restore range of motion, mobility and movement.

Exercise Physiology is a more active based treatment in which restoration of strength, mobility and functional capacity is the primary goal. Along with strength and conditioning, an Exercise Physiologist will prescribe patients with 'Active Coping Strategies' such as trigger release, foam rolling and stretching which serves as an active form of symptom management during flare ups.

By performing a clinical, structured rehabilitation and maintenance program, this will not only enhance overall function but also minimise the risk of re-injury.

#### Taylor, what's the best part of your job?

The most positive aspect of the job is teaching ordinary individuals to take charge of their body, understand their own process of recovery and provide them with the tools to manage their condition or injury in the long term.

Seeing an individual improve and better themselves, and achieve feats that they did not think was possible, makes this job very worthwhile.