

# Impact of the COVID-19 crisis on the osteopathic practice: results of a Swiss survey and comparison with the Belgian situation



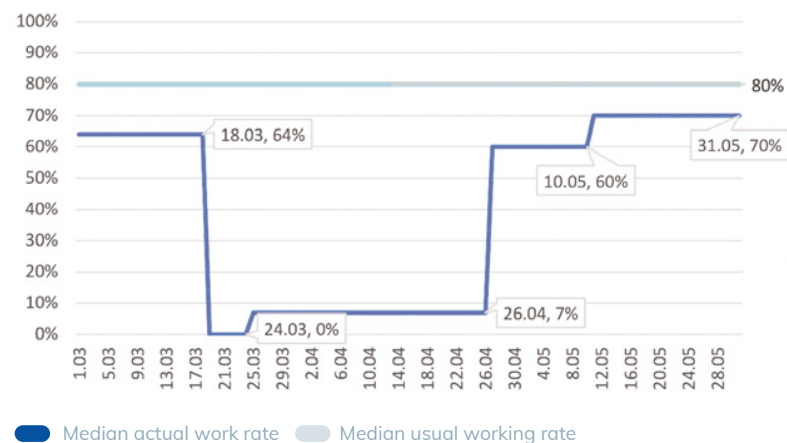
Céline Van Ballart

This whole COVID-19 crisis has had a clear effect on the entire healthcare system, including us osteopaths. Especially during the beginning of the pandemic the number of consultations dropped significantly, both due to government restrictions and patients being afraid to leave their homes. Like everyone else, osteopaths had to follow specific hygiene measures: wear masks, provide (hand) disinfectant and establish an extensive cleaning routine. It required a constant adapting of care as needed. All this so that we, as healthcare workers could contribute to the health of the general population.



Patrick van Dun

In order to provide a better insight on how to plan and anticipate future needs from professional osteopathic care providers during such a crisis, our Swiss colleagues of the SVO-FSO (Swiss Federation of Osteopathy) and the SOSF (Swiss Osteopathy Science Foundation) commissioned the HEdS-FR (School of Health Sciences Fribourg) and HES-SO (University of Applied Science and Arts Western Switzerland) to carry out a survey among their members.<sup>40</sup>



**Figure 1**  
Work rate impact of the COVID-19 crisis  
100% = 42 h/week (from MacDonald and Vaucher, 2020)

“A drop in the work rate goes hand in hand with a drop in the number of consultations.”

An online survey investigated self-reported professional activities before and during the COVID-19 crisis. Clinical activities were investigated asking osteopaths to report the number of actual consultations during March, April, May 2020 and April 2019 as a comparison.

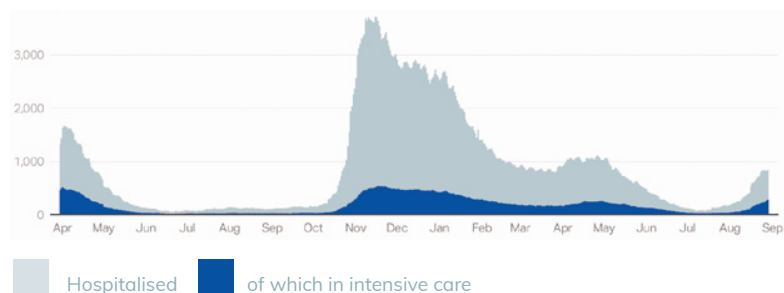
Out of 945 contacted osteopaths, 276 (29.2%) completed the survey. The aim was to get a clearer picture of the impact of COVID-19 on the work rate, the number of consultations, the loss of revenue, the need for government support and the implementation of protective measures.<sup>40</sup>

In Switzerland, osteopaths were able to work without restrictions up until the 18th March 2020. For a brief period, 19-24th March, medical prescriptions were made compulsory for patients to be able to receive osteopathic care. From 25th March to 26th April, consultations were limited to urgent consultations only. After that, osteopaths were allowed to see all patients again, but had to follow strict hygiene measures (masks, cleaning routine, disinfectant).<sup>40</sup>

During normal activity in the first quarter of 2020, there was a median work rate of 80% (average of 33.6 hours per week). Just before the restrictions the median work rate dropped to 64% (67% of osteopaths were still working as usual). In the short period when prescriptions were compulsory the median work rate went to 0% (66.3% were not working at all). During the urgent consultations only period the median work rate was 7% (66.7% of osteopaths worked partially). After the restrictions were lifted, osteopaths immediately returned to a median working rate of 60% (46% were working as usual) and were able to increase up to 70% working rate two weeks later (62.7% were working as usual and 5.8% had increased workload than usual) (figure 1).<sup>40</sup>

A drop in the work rate goes hand in hand with a drop in the number of consultations. Comparing the median number of consultations for the period of restrictions, 25th March – 26th April 2020, with the same period of 2019, the survey shows a decrease of 82% (from an average of 93 to 16.5 consultations).<sup>40</sup>

A similar survey conducted in Belgium, at a later period in the pandemic, came to similar insights. When comparing the last quarter of 2020 with the same months in 2019, 62% of the Belgian osteopaths reported a drop in patient load in September, 77.1% in October, 64.5% in November and 60.6% in December.<sup>41,42</sup>



**Figure 2**  
Hospitalised patients in Switzerland  
(from the Federal Office of Public Health, 2021)<sup>43</sup>

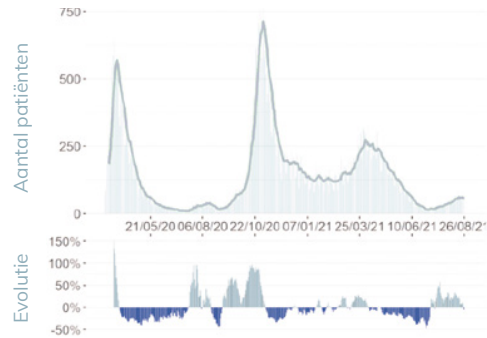
When comparing the results of the surveys with the number of hospitalised patients both for Switzerland (figure 2) and Belgium (figure 3), a trend can be seen that when the severity of the pandemic increases, there is a decrease in the number of osteopathic consultations. This drop cannot be explained only by government restrictions, as normal consultations were allowed to continue in the period September – December 2020. Patients seemed to have had a tendency to postpone non-urgent consultations until infection rates dropped.<sup>40-42</sup>

On the economical perspective, both the Swiss and Belgian survey showed that osteopaths saw their incomes decrease due to the restrictions and the limited working hours.<sup>40-42</sup>

For Switzerland, the median estimated loss of revenue reported by osteopaths was 50% in March, 80% in April and 15% in May 2020. Government aid was requested by 177 osteopaths (64.1%) of which 104 (58.8% of requests) obtained compensations to help cover the loss of revenue. The main reasons for refusal were an income being over 90'000.- CHF and professional activity being allowed.<sup>40</sup>

For Belgium, half (50.5%) of the osteopaths reported a reduction in revenue for September and October and less than a third (29,5%) for November and December. The financial impact was worse for our colleagues south of the language border. This was also the region most severely affected during that period of the pandemic. Government funded support was available for anyone with an income loss of more than 60%.<sup>41,42</sup>

It is clear that almost all osteopaths, be it in Belgium or Switzerland, made an effort to maintain patient care during these difficult times. During the lockdown there was a shift towards providing patients self-management advice and education. Digitalization played an important role, and more and more osteopaths began to use technology to improve patient care. Osteopaths invested in hygienic materials even though overall revenues were lower. All adapted their practices and services to help protect their patients.<sup>40</sup>



**Figure 3**  
Evolution of the number of new laboratory-confirmed hospital admissions in Belgium (from Sciensano, 2021)<sup>44</sup>

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