

## Symposium

📅 2025年9月28日(日) 14:50 ~ 16:20 🏢 Session Room 3 (Large Hall A)

**[Symposium 102] Re-work Program in Japan: Resilience Improvement and Relapse Prevention after Return-to-Work**

Moderator: Tsuyoshi Akiyama (World Federation for Mental Health)

[SY-102]

Re-work Program in Japan: Resilience Improvement and Relapse Prevention after Return-to-Work

Shinsuke Washizuka<sup>1</sup>, Hikaru Hori<sup>2</sup>, Sang-un Park<sup>3</sup>, Tsuyoshi Akiyama<sup>4</sup> (1.Shinshu University(Japan), 2.Fukuoka University(Japan), 3.Daedong Hospital(Korea), 4.Rokubancho Mental Clinic(Japan))

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[SY-102-01]

Outcomes of an interdisciplinary return to work intervention including occupationaltherapy for mood and adjustment disorders

\*Shinsuke Washizuka<sup>1</sup>, Sachie Tanaka<sup>2</sup>, Ryunosuke Iwai Kuge<sup>3,4</sup>, Miku Nakano<sup>3,5</sup>, Sayaka Inukai<sup>6</sup>, Midori Hamamoto<sup>1</sup>, Miho Terasawa<sup>7</sup>, Nobuhiro Sugiyama<sup>8</sup>, Masayoshi Kobayashi<sup>2,4</sup> (1.Department of Psychiatry, Shinshu University School of Medicine(Japan), 2.Department of Fundamental Occupational Therapy, Shinshu University School of Health Sciences(Japan), 3.Department of Rehabilitation, Shinshu University Hospital(Japan), 4.Department of Health Sciences, Shinshu University Graduate School of Medicine(Japan), 5.Department of Medical Sciences, Shinshu University Graduate School of Medicine(Japan), 6.Patient Support Center, Shinshu University Hospital (Japan), 7.Department of Pharmacy, Shinshu University Hospital(Japan), 8.Department of Applied Occupational Therapy, Shinshu University School of Health Sciences(Japan))

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[SY-102-02]

The Possibility of Personalized Treatment for Major Depressive Disorder in the Re-work Program

\*Hikaru Hori (Department of Psychiatry, Faculty of Medicine, Fukuoka University(Japan))

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Shinsuke Washizuka<sup>1</sup>, Hikaru Hori<sup>2</sup>, Sang-un Park<sup>3</sup>, Tsuyoshi Akiyama<sup>4</sup> (1.Shinshu University(Japan), 2.Fukuoka University(Japan), 3.Daedong Hospital(Korea), 4.Rokubancho Mental Clinic(Japan))

Most people who worked competitively when they developed a mental illness want to return to work. In Japan, the Re-work program aims to improve resilience and prevent relapse after returning to work. This model includes psychoeducation, health condition monitoring, and improving communication and problem-solving skills as indispensable components for lessening workplace stress. Evidence of the effectiveness of the re-work program has emerged. In this symposium, Shinsuke Washizuka reports a single-arm clinical trial of the outcomes of an interdisciplinary return-to-work intervention, including occupational therapy. Interdisciplinary interventions, including occupational therapy, can potentially improve depressive symptoms, cognitive functioning, job performance, social adaptation, and readiness to return to work. The rehabilitation required for each patient may differ. Akira Hori examined the effectiveness of individualized rehabilitation for patients with major depressive disorder. The social-cognitive function of the personalized treatment group improved significantly. Personalized rework programs tailored to a patient's situation may be required. Sang-un Park launched the first Re-work Program in Korea 2017 at Daedong Hospital. Owing to various challenges, the program was discontinued and restarted in 2023. Park will discuss what kind of efforts and environment are needed to make the rework program work in Korea. Tsuyoshi Akiyama will report a review of the research on return-to-work programs around the world. There are ongoing efforts to help people with mental illnesses return to work. However, there is a lack of resilience improvement and relapse prevention perspectives in these programs and research. The provision of effective programs to improve resilience and prevent relapse in people with mental illnesses will have immense implications for the contribution of psychiatry to society. Clinicians, researchers, and stakeholders should collaborate to promote the desperately needed advancement in this area, which will help many people who develop a mental illness during competitive jobs to attain recovery from the illness.

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Moderator: Tsuyoshi Akiyama (World Federation for Mental Health)

### **[SY-102-01] Outcomes of an interdisciplinary return to work intervention including occupational therapy for mood and adjustment disorders**

\*Shinsuke Washizuka<sup>1</sup>, Sachie Tanaka<sup>2</sup>, Ryunosuke Iwai Kuge<sup>3,4</sup>, Miku Nakano<sup>3,5</sup>, Sayaka Inukai<sup>6</sup>, Midori Hamamoto<sup>1</sup>, Miho Terasawa<sup>7</sup>, Nobuhiro Sugiyama<sup>8</sup>, Masayoshi Kobayashi<sup>2,4</sup>  
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キーワード：re-work program、return-to-work support、sick leave、relapse prevention

Mood disorders and adjustment disorders are the two major causes of long-term sick leave among employees, leading to significant social losses. In Japan, a group program aimed at supporting return to work (RTW) for workers on leave due to these disorders was first launched at NTT East Kanto Hospital in 1997. Shinshu University Hospital, where we are affiliated, also launched this program in 2014. We investigated the outcomes of a interdisciplinary RTW intervention including occupational therapy implemented at our institution from 2014 to 2020. We report the specific content and outcomes of this intervention. Our program was implemented five times a week for approximately three months for employees on leave with mood disorders and adjustment disorders. The intervention aimed to recover from mental disorders and restore work ability, as well as to improve coping abilities with interpersonal stress, acquire appropriate emotion control methods, and appropriately accept the illness and actively engage in treatment to prevent recurrence. Psychiatric symptoms, cognitive function, job performance, temperament, social adaptation, psychosocial status, and readiness for RTW were evaluated before and after the intervention. The full-time RTW rate was followed up at 3, 6, 12, 18, and 24 months after baseline and compared with previous studies. A total of 30 participants completed the program. After implementation, participants' psychological symptoms, cognitive function, occupational aptitude, temperament, social adaptation, psychosocial status, and RTW readiness improved. The return-to-work rates 12 and 24 months after baseline were 73.3% and 82.6%, respectively, which tended to be higher than previous reports. It was suggested that an interdisciplinary RTW readiness intervention, including occupational therapy, may improve not only psychiatric symptoms but also cognitive function, job performance, social adaptation, and RTW readiness, thereby increasing the RTW rate.



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Moderator: Tsuyoshi Akiyama (World Federation for Mental Health)

### **[SY-102-02] The Possibility of Personalized Treatment for Major Depressive Disorder in the Re-work Program**

\*Hikaru Hori (Department of Psychiatry, Faculty of Medicine, Fukuoka University(Japan))

キーワード：Major depressive disorder、Re-work、cognitive function、social cognition

The number of workers in Japan on sick leave due to mental health-related illnesses is increasing. Even after returning to work after undergoing psychiatric treatment (pharmacotherapy, psychotherapy, environmental adjustment), it is known that the rate of return to sick leave is high<sup>1)</sup>. We reported that the factors necessary for continued employment were activity, cognitive function, social adaptability, and benzodiazepine use<sup>2), 3), 4)</sup>. We also reported on the effectiveness of the re-work program<sup>5)</sup>. However, major depressive disorder is highly heterogeneous. Therefore, the rehabilitation required for each patient in the re-work program may differ. We examined the effectiveness of individualized rehabilitation for patients with major depressive disorder<sup>6)</sup>. In this study, participants were randomly assigned to either the personalized treatment group or the usual treatment group, and underwent 8 weeks of rehabilitation treatment. Both groups showed improvements in neurocognitive function, social cognitive function, and emotional processing<sup>7)</sup>. The social cognitive function of the personalized treatment group improved significantly. In the future, personalized rework programs tailored to the patient's situation may be required.

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3) Hori H et al., BMJ Open 11;9(9): e029705, 2019

4) Atake K et al., Psychiatry Res; 291: 113209, 2020

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6) Knight MJ, Baune BT. Front psychiatry 12:8:280, 2017

7) Knight MJ et al., Psychiatry Res 300:113906, 2021

8) Hawighorst A, Hori H et al., Psychiatry Res 330:115590, 2023