

of injury), while most reported verbally (58.9%) to coworkers/managers or documented in the patient's chart (14.9%).

Conclusion While the prevalence and number of violent events was high, the reporting of events by workers into a formal system was low. Reporting systems developed specifically for capturing type II violent events are needed for purposes of informing and evaluating targeted workplace violence prevention strategies.

Session: 30. Lymphoma and leukemia

377 OCCUPATION AND RISK OF LYMPHOID AND MYELOID LEUKEMIA IN THE EUROPEAN PROSPECTIVE INVESTIGATION INTO CANCER AND NUTRITION (EPIC)

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Objectives Established risk factors of leukemia do not explain the majority of leukemia cases. Previous studies have suggested the importance of occupation and related exposures in leukemogenesis. We evaluated possible associations between job title and selected hazardous agents and leukemia in the European Prospective Investigation into Cancer and Nutrition.

Methods The mean follow-up time for 241,465 subjects was 11.20 years (SD: 2.42 years). During the follow-up period, 477 incident cases of myeloid and lymphoid leukemia occurred. Data on 52 occupations considered *a priori* to be at high risk for developing cancer were collected through standardized questionnaires. Occupational exposures were estimated by linking the reported occupations to a Job exposure matrix. Cox proportional hazard models were used to explore the association between occupation and related exposures and risk of leukemia.

Results Risk of lymphoid leukemia significantly increased for working in chemical laboratories (HR = 8.35, 95% CI = 1.58–44.24), while the risk of myeloid leukemia increased for working in the shoes or other leather goods industry (HR = 2.54, 95% CI = 1.28–5.06). Exposure specific analyses showed a non-significant increased risk of myeloid leukemias for exposure to benzene (HR = 1.15, 95% CI = 0.75–1.40; HR = 1.60, 95% CI = 0.95–2.69 for the low and high exposure categories respectively). This association was present both for acute and chronic myeloid leukemia at high exposure levels. However, numbers were too small to reach statistical significance.

Conclusion Our findings suggest a possible role of occupational exposures in development of both lymphoid and myeloid leukemia. Exposure to benzene seemed to be associated with both acute and chronic myeloid leukemia.

378 OCCUPATION AND RISK OF NON-HODGKIN LYMPHOMA (NHL) AND SUBTYPES: A POOLED ANALYSIS FROM THE INTERLYMPH CONSORTIUM

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Objectives A range of occupations have been associated inconsistently with an elevated NHL risk. In this large, pooled study, we investigate the relationship between occupation and NHL and NHL subtypes.

Methods This pooled study of 10 NHL case-control studies participating in the InterLymph consortium, included 10,046 cases uniformly classified by subtype and 12,025 controls. Occupational histories were classified according to the ISCO 1968 classification, and occupations previously associated with increases in hematologic cancer risk were grouped into 26 *a priori* high risk occupational groups. Odds ratios, adjusting for centre, age and sex were determined for the *a priori* groups as well as all ISCO occupational codes including a minimum of 10 cases. Analyses were repeated by sex and for the subtypes diffuse large B-cell lymphoma (DLBCL; n = 3,061), follicular lymphoma (FL; n = 2,140), chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL; n = 1,014) and T-cell lymphoma (n = 632).

Results DLBCL risk was elevated for textile workers (OR: 1.19; 95%CI: 1.01–1.41); field crop and vegetable farm workers (1.50; 1.15–1.97); charworkers, cleaners and related workers (1.27; 1.03–1.58) and hairdressers (1.47; 1.08–2.00). FL risk was elevated for unspecified labourers (1.28; 1.06–1.55) and spray painters (2.67; 1.36–5.25). CLL/SLL risk was elevated for women's hairdressers (2.69; 1.43–5.05); general farm workers (1.44; 1.13–1.84); pre-primary education teachers (2.00; 1.04–3.87) and printing pressmen (6.52; 2.79–15.2). T-cell lymphoma risk was elevated for textile workers (1.60; 1.18–2.17); wood workers (1.54; 1.04–2.27) and painters (1.80; 1.14–2.84). ORs differed significantly among subtypes for hairdressers, textile workers and printing pressmen.

Conclusions This pooled analysis supports a role for farming, textile, and hairdressing related exposures in the development of NHL. Occupations with potential exposure to solvents, metals, wood dust, infectious agents and mineral dust were also positively associated with NHL. For all four studied NHL subtypes occupational risk factors play a role, with notable differences in risk occupations across subtypes.

379 OCCUPATIONAL EXPOSURE TO TRICHLOROETHYLENE AND RISK OF NON-HODGKIN LYMPHOMA AND ITS MAJOR SUBTYPES: A POOLED INTERLYMPH ANALYSIS

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