

Session: I. Injury

64 ACUTE PESTICIDE POISONING IN SIKASSO, MALI

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Objectives Pesticide poisoning has become a major public health problem worldwide, following the intensification of agriculture. The easy availability of highly toxic pesticides in the homes of farming communities has made pesticides the preferred means of suicide with an extremely high fatality rate. Similarly, the extensive use of pesticides exposes the community to both long-term and acute occupational health problems. The aim of this study is to describe the main characteristics of acute pesticide poisoning in Sikasso.

Methods A descriptive retrospective analysis of pesticide poisoning cases, recorded between 2002 and 2010 in Sikasso hospital, was performed.

Results A total of 47 acute pesticide poisoning cases were identified, constituting 10.6% of poisoning cases notified during the period of study. These products were responsible for poisoning of varying severity, depending on the nature of the compounds, duration and frequency of exposure. The average age of victims is 24 years. Almost 90% of reported cases result from oral exposure and 10% from inhalation. The risk is mainly related to the use of organophosphates. Among the cases for whom the evolution is known, 6 of them died. For other cases, the outcome was favourable with or without sequelae.

Conclusions Preventive measures should be taken to rationalise pesticide use, which pose a real public health problem, not only for users, but also for the general population.

65 THE INCIDENCE AND IMPACT OF RECURRENT WORKPLACE INJURY AND DISEASE, VICTORIA, AUSTRALIA

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Objectives To determine the incidence and impact of recurrent workplace injury and disease over the period 1995 to 2008 in Victoria, Australia.

Methods This was a population-based cohort study using data from the state workers' compensation system database. A total of 448,868 workers with an accepted workers' compensation claim between 1 January 1995 and 31 December 2008 were included into this study. Descriptive statistics were used to provide an overview of initial (first claim of a worker) and recurrent (second or subsequent claim of a worker) claims by gender, nature of affliction (injury or disease) and type of benefits paid (income replacement and medical expenses). Two outcomes were considered in this study: the rates of initial and recurrent injury and disease over the 14 year period; and the number of compensated days away from work, which was used as the indicator of 'work disability'.

Results Over the study period 448,868 workers lodged 972,281 claims for discrete occurrences of work-related injury or disease. 53.4% of these claims were for recurrent injury or disease. On average, the rates of initial claims dropped by 5.6% per annum, while the rates of recurrent injuries decreased by 4.1%. In total,

workplace injury and disease resulted in 188,978 years of loss in full time work, with 104,556 of them being for the recurrent injury.

Conclusions Recurrent work-related injury and disease is associated with a substantial social and economic impact. There is an opportunity to reduce the social, health and economic burden of workplace injury by enacting secondary prevention programs targeted at workers who have incurred an initial occupational injury or disease.

66 MEDICAL CERTIFICATION OF INJURED WORKERS BY GENERAL PRACTITIONERS IN THE STATE OF VICTORIA, AUSTRALIA: A DESCRIPTIVE STUDY

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Objectives To describe the medical certification practices of General Practitioners (GPs) in their interactions with injured workers receiving compensation under Victorian workers' compensation scheme over the period 2003–2010 in Victoria, Australia

Methods Compensation research database, containing workers' compensation administrative claims data and medical certification information was accessed to extract data for the period 2003 to 2010 for males and females. All claimants, 15–65 years of age with 'lost-time' claims only were included into analysis. Only the initial certificates were analysed. Medical certificates were divided into three groups: "unfit for work", "alternate duties" and "fit for work". Injuries and diseases were categorised into fractures, musculoskeletal (MSK) injuries and diseases, other (non MSK) traumatic injuries, back pain and strains, mental disorders and other diseases.

Results Over the period of 2003–2010 a total of 9,750 GPs issued 124,424 medical certificates to the injured workers. The majority of certificates (40.2%) were for MSK injuries and diseases, followed by back pain and strains (16.4%) and other traumatic injuries (15.6%). Almost two thirds of all certificates were issued to males; however in the mental disease category more than 50% of certificates were written to females. The vast majority of certificates (>74%) were "unfit for work", with 94% of them being for mental disorders. This is in contrast to the findings for MSK injuries and disorders (68.0%) or other diseases (53.0%). The duration of "alternate duties" certificates was ~4 days longer than "unfit for work".

Conclusions This was the first of planned analyses examining the medical certification practices of GPs. It already demonstrates different certification patterns and suggests that GPs may play an important role in returning injured workers back to work. Future analyses will examine changes in GP certification practices over time and patterns of health service utilisation by injured workers following medical certification.

67 DELAY-ONSET PARAQUAT-INDUCED KERATOCONJUNCTIVITIS IN A FARMER

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