industries we conducted a nested case-control study matched on these factors. Analyses were performed with conditional logistic regression.

Results The RR of overall sinonasal cancer (37 cases) was doubled in the upper exposure tertile compared to the lower exposure tertile. For adenocarcinomas (9 cases), the RR in the medium and upper exposure tertiles were 1.17 (95%CI 0.07–18.72) and 7.87 (95%CI 0.97–63.94), respectively. Comparable results were obtained from the case-control analysis indicating limited confounding by age, gender and wood dust exposure. No consistent trend was observed for squamous cell carcinomas.

Conclusion Despite statistically non-significant results and limitations owing to the few cases, this study indicates increased risk of sinonasal adenocarcinomas among high level styrene exposed workers and could signal a carcinogenic effect of styrene.

Poster Presentation

Risk Assessment

0177 OCCUPATIONAL RISK ASSESSMENT ON CHRYSOTILE PRODUCTION

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The research was conducted at the only enterprise in Kazakhstan producing chrysotile - "Kostanai minerals" JSC. Sanitary and hygienic studies were carried out and working conditions were evaluated at 102 workplaces of the Processing Complex (PC). The level of Morbidity with Temporary Incapacity for Work (MTIW) was analysed for 758 employees of the PC workers. The occupational risk assessment was carried out according to the method proposed by professor Izmerov. For the processing and analysis of data, the probabilistic-statistical methods and the odds ratio method are applied.

By using results of the conducted studies of working conditions of PC workers was established that the main unfavourable factors of the labour process are the increased noise level and dustiness of workplace air. As a result of the analysis has established the following features: 1. Female's indicators of the MTIW are more expressed than males; 2. Established that morbidity rates are significantly higher among workers aged 30–39 years and work experience at the PC up to 9 years. 3. According to the main MTIW indicators, the following groups are at the highest level: "Traumas in everyday life", "Diseases of the respiratory organs, including SARS" and "Diseases of the musculoskeletal system"

Based on the degree of significance of the location of occupational risk indicators, the categories and criteria for the health profiling of health of PC workers are defined in the following order: 1) "MTIW" and "integral disability index"; 2) "working environment class"; 3) "occupational disease" and "occupational disease index".

Poster Presentation

Psychosocial

0179 FACTORS ASSOCIATED WITH HIGH NEED FOR RECOVERY IN DIFFERENT AGE GROUPS

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Aim To explore associations of occupational factors with a high need for recovery (HNFR) in different age groups.

Methods The need for recovery (NFR) is a short term health effect, predictive for future long term adverse mental health effects.

This was a cross-sectional study in 17 400 subjects (75.7% participation rate), working in 128 organisations (both private and public). The subjects were divided into 8 age groups.

NFR was assessed by the NFR scale questionnaire (0–100 scale). High need for recovery (NFR >45) was used as outcome variable.

20 work related psychosocial factors were assessed: 13 originating from the Copenhagen Psychosocial Questionnaire (COPSOQ II short version) and 7 were developed within our service. Other variables were: physical workload, gender and age (total study population).

Multivariate log-binomial regression analyses were used to calculate regression coefficients for a HNFR, for the total population and for each age group separately.

Results General prevalence of HNFR was 35.9%. Prevalences were significantly different between the different age groups, ranging from 23.8% to 39.1%.

Physical workload, quantitative demands, work-life balance and discomfort from physical work environment had a significant association with HNFR in all age groups.

Emotional demands, organisational social capital, participation in decision making, possibilities for development, growth opportunities, working more hours than desired, job insecurity, undesirable behaviour and gender were additionally significant in one or more age groups.

Conclusions Four occupational factors need to be considered throughout the whole career. Additional and different factors need to be taken into account according to age group.

Oral Presentation

Occupational Medicine (SCOM/Modernet)

0181 METHODOLOGIES TO IDENTIFY WORK-RELATED DISEASES: IN-DEPTH DESCRIPTION OF SELECTED OF SENTINEL OR ALERT SYSTEMS

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