Results Almost one in two farmers had high blood pressure (46%; n=140) and/or raised cholesterol (46%; n=140). Four in five farmers were overweight/obese based on body mass index (86%; n=267) and waist circumference (80%; n=244) measurements. The majority of farmers were found to have at least four risk factors for CVD (83%; n=255) increasing risk of a cardiac event by 3.2 times.

Discussion This prevalence of multiple risk factors for CVD among farmers is a particular cause of concern, and sheds light on the excess burden of CVD mortality among farmers in Ireland. There is an urgent need for a broader focus on health within the context of ‘occupational risk’ and farm policy.

Poster Presentation
Ageing Workforce

0273 TEACHERS’ WELL-BEING AT WORK AND QUALITY OF LIFE: ANY DIFFERENCES ACCORDING TO YEARS OF EXPERIENCE?
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Objectives In a context of ageing workforce, this study aimed to evaluate, among teachers, differences of work and general well-being according to years of experience, and to suggest recommendations.

Methods In the population-based postal survey “Teacher’s Quality of Life” (MGEN Foundation/Ministry of education), 2320 primary and secondary teachers were asked about their well-being at work (professional experience satisfaction, teaching experience evolution over the past five years, three dimensions of the Maslach Burnout Inventory) and general well-being (quality of life, perceived health, four scores of the WHOQOL-BREF questionnaire). These indicators were analysed in multivariate regression models adjusted on sociodemographic and occupational factors, according to the categories of years of experience: ≤5, 6–29, ≥30.

Results Compared to more experienced teachers, early-career teachers had less favourable work conditions and a lower environmental health score (−3 points 95%CI=[−5.1]−(−1.0); p=0.005). Senior teachers were more likely than mid-career teachers to judge their work as becoming "more and more difficult" (OR=2.6 [2.0–3.4], p<0.001). They also tended to show more burnout symptomatology. They were less satisfied with their quality of life (OR=0.7 [0.5–0.9]; p=0.009) and their health (OR=0.7 [0.5–0.9]; p=0.002), especially from a physical and social relationship’s point of view (−5.4 points [−7.1]−(−3.8)); p<0.001 and −3.0 points [−4.8]−(−1.3)); p=0.001 respectively.

Conclusion This study adds further evidence towards the hypothesis of a decrease in teachers’ well-being at the end of their career, and supports the interest of carrying out targeted support and preventive actions. Attention should also be paid to early-career teachers who may face particularly difficult work conditions.

Poster Presentation
Burden of Disease

0276 PREDICTORS OF RETURN TO WORK 12 MONTHS AFTER SOLID ORGAN TRANSPLANTATION: RESULTS FROM A COHORT STUDY IN SWITZERLAND
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Background With increases in the UK pensionable age, people are now expected to work to older ages, but they may also have caring responsibilities which constrain their capacity to work and could affect their health. To explore the extent of the problem, we assessed the profile of unpaid carers in the HEAF study.

Methods 8134 men and women aged 50–64 were recruited from 24 English general practices. Socio-demographic, lifestyle and health characteristics were elicited by postal questionnaire, along with weekly hours giving personal care to someone in the home or family.

Results 644 (17.4%) men and 1153 (26.0%) women had caring responsibilities; of these, 93 (14%) and 199 (17%) reported caring for ≥20 hours/week respectively. Participants with lower levels of education or social class, non-homeowners, and those struggling to manage financially were more likely to be carers. Carers of both sexes were less likely to be working and, if working, more likely to be part-time or often working shifts. Carers, and particularly those caring for ≥20 hours/week, reported worse health (self-rated, depression and sleep problems). Prevalence of chronic musculoskeletal pain was 32% and 44% respectively among men and women who cared ≥20 hours/week, in comparison with 23% and 27% amongst non-carers.

Conclusions The requirement to be a carer is common in the HEAF cohort. Those affected are less likely to be in full-time employment and more likely to be in worse health. There is a need for further research on how older workers with caring responsibilities can be better supported.