Background Return to work with or after a chronic disease is not a very well understood process, influenced by a variety of personal, professional, societal and medical factors. The aim of this study is to identify predictors for return to work 12 months after a solid organ transplant, applying a bio-psycho-social model.

Methods Explorative study based on patients included in the Transplant Cohort Study, a national, prospective, multicentric cohort, who underwent a first solid organ transplant (kidney, liver, heart, lung). Bio-psycho-social factors were tested and predictors of return to work identified using logistical regression models.

Results Among the 636 patients included in the study, 49.8% (317) were employed 12 months post transplant. The major predictor for returning to work 12 months post transplant was pre-transplant employment status (OR: 10.8). Accordingly, the population was stratified in employed and unemployed pre transplant groups. Age, self-perceived health (SPH, six months post-transplant) and the transplanted organ were significantly associated with post transplantation employment status in both groups. Additionally, return to work was influenced by education, depression (six month post-transplant) and waiting time in the employed pre transplant group and by invalidity pension in the unemployed pre transplant group.

Conclusion Employment rate pre transplant being highly associated with employment status post transplant, the process promoting return to work should be started well before surgery.

Poster Presentation

Respiratory

0277 SENSITIVITY AND SPECIFICITY OF OCCUPATIONAL HEALTH DOCTORS READING OF EARLY STAGE PNEUMOCONIOSIS RADIOGRAPHS

¹Phanumas Krisorn*, ¹Naesinee Chaiear, ²Ponglada Subhannachart, ³Narongpon Dumavibhat, ²Sutarat Tungsagunwattana, ⁰Krittin Silanun. ¹Division of Occupational Medicine, Department of Community Medicine, Faculty of Medicine, Khon Kaen University, Khon Kaen, Thailand; ²Central Chest Institute of Thailand, Department of Medical Services, Ministry of Public Health, Nonthaburi, Thailand; ³Department of Preventive and Social Medicine, Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand; ⁴Department of Community Medicine and Family Medicine, Faculty of Medicine, Thammasat University, Pathum Thani, Thailand

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Objective This study was aimed to find out the sensitivity and specificity in reading early stage pneumoconiosis radiographs by Occupational Health Doctors (OHDs).

Materials and method A screening test was applied. Thirty three of OHD consented to join the study. The test radiographs consisted of 67 normal and early stage pneumoconiosis films. Before testing, all participants were introduced to basic ILO reading for 65 min by 3 B-reader ILO pneumoconiosis experts. The cut-point for disease was set at profusion 0/1

and 1/0. Mean sensitivity and specificity for small opacities detection was analysed.

Results The median sensitivity of ILO profusion 0/1 or above was 88% (IQR 10.3), the median sensitivity of 1/0 cut-point film was slightly increase at 90% (IQR 10.3), while the mean specificity for ILO profusion 0/1 or above was 43.3% (SD 21.1). When stepping the cut-point to profusion 1/0, the mean specificity increased to 47.0% (SD 20.9).

Conclusion This study showed that OHDs were able to interpret chest radiographs of workers who have had early stage pneumoconiotic radiographs. Therefore, chest X-ray reading skill development for OHDs has value for the surveillance system in this country.

Poster Presentation

Disease Surveillance

0278 WORK RELATED CHARACTERISTICS OF LUNG CANCERS AMONG MALE CONSTRUCTION WORKERS: FOCUSING ON OCCUPATIONAL CANCER SURVEILLANCE DATA IN KOREA, 2011–2016

¹Bo Reum Seo, ¹Yoon-Ji Kim*, ^{1,2}Dongmug Kang, ²Jong-Eun Kim, ^{1,2}Young-Ki Kim. ¹Preventive and Occupational Medicine, School of Medicine, Yangsan-si, Gyeongsangnam-do, Republic of Korea; ²Occupational and Environmental Medicine, Pusan National University Yangsan Hospital, Yangsan-si, Gyeongsangnam-do, Republic of Korea

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The aim of this study is to examine occupational characteristics, hazardous work types and exposed substances in lung cancer in the construction industry by using data of occupational cancer surveillance at the national level in Korea.

From 2011 to 2016, there were 6418 patients with lung cancer were registered through the Occupational Cancer Surveillance. Among them, the F class of the Korean Standard Industrial Classification and male sex were a total of 580 patients. Work relatedness was divided into 'High' and 'Low'.

Focusing on work relatedness, 19.0% were high and 81.0% were low. There was no difference in the distribution of work relatedness and age groups ($p=0.525$) and total smoking amount ($p=0.903$) in lung cancers. There was a significant difference in the distribution of work relatedness and latency ($p=0.019$). The high prevalent 30 work types and 9 exposures high work relatedness in lung cancer. Painter of Painters (18.2%) were the most common hazardous material and job of followed by Crystalline silica in Elementary Workers (7.2%), and Crystalline silica in Stonemason (5.4%) in order.

Lung cancer occurred at younger ages in construction workers compared to non-construction workers. Smoking has no relation with the work relatedness of lung cancer. It is necessary to manage work type and risk factors that are highly related to cancer in the construction industry.