SICK LEAVE BENEFITS BY ENDOCRINE DISEASES: A RETROSPECTIVE EPIDEMIOLOGICAL STUDY

LFT Priester*, DVS Vitor, RV de Brito, DVS Vitor, LR Ferreira. Centro Universitário das FaculdadesAssociadas de Ensino, São João da Boa Vista, Brazil.

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Introduction Endocrine Diseases (ED) have a high prevalence around the world. In 2014, the World Health Organisation estimated that many adults will be affected by those diseases, worldwide. ED are classified as many different chronic diseases with distinct aetiologies, and they are some of the main causes of disability, which can negatively influence productivity in active workers. In Brazil, those disabled workers with ED diseases can apply for Sick Leave Benefits granted by the Brazilian National Institute of Social Security (BNISS). This Institute is responsible for granting benefits and salaries for work disability.

Methods This was a retrospective cross-sectional study which evaluated 538 workers receiving temporary sick leave benefits from the BNISS caused by ED. The workers were evaluated from June 2014 until July 2016 and submitted to a structured analysis for data collection including: gender, age, affiliation to BNISS, and other endocrine diseases (4%) ICD-10 E85. The employed affiliation to BNISS was found in 66.5% of females, and 50% of males. Other endocrine diseases were found, as amiloidosis (0.2%) ICD-10 E85, and other endocrine disturb (4%) ICD-10 E88.

Discussion The results showed that obesity and diabetes are important risks factors for functional endocrine injuries, enhancing the harmful effects of overweight and hyperglycemic diet to health and quality of life of workers. These data can help new strategies to enhance obesity and diabetes prevention and health promotion programs for workers.

OCCUPATIONAL HEALTH NURSES WORKING AS WORKSITE HEALTH PROMOTION AGENTS


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Introduction Traditional role in occupational nursing had been for many years to assist occupational physicians and provide primary health care services. Worksite health promotion field requires a different role for occupational nurses. Our team was trained in health coaching and started offering a new service for workers. Workers can have their personal coach for lifestyle risk management. In this poster we selected two experiences to communicate the impact of this kind of recourse for worksite health promotion programs.

Methods In an Company a 1000 employees from the oil and gas industry with 98% of workers screened for lifestyle risks annually, we define as target of the intervention 2 major risks: Hypertension and weight issues. Two wellness programs were offered: Blood pressure initiative and Wise. Occupational Nurses were the health promotion agents in charge of the program implementation. We measure each risk at the beginning and we measure impact of the intervention. Core intervention were health coaching interactions.

Result Wise program 219 enrolled employees, 182 participating, Initial measures: overweight: 36.3%, obese type 1: 33.0%, obese type 2: 16.5%, obese type 3: 4.9%, healthy weight: 9.3%. Final measures: overweight: 37.9%, obese type 1: 34.6%, obese type 2: 12.6%, obese type 3: 4.9%, healthy weight: 9.9%. Total weight loss: 484.90 kg. Blood pressure program: 935 enrolled and screened employees, 184 employees didn’t knew they had hypertension measurements and of them 98 were diagnosed. Healthy habits modification: 71%.

Conclusion Health coaching is a powerful intervention for healthy habits modification in order to reduce lifestyle related risks. Occupational nurses are a strategic group of health professionals for worksite health promotion programs. All this aspects may contribute to develop new roles for occupational health nurses to contribute to build a healthy culture in the workplace.