attacks 'Mill Fever.' Thanks to John Pemberton's (and others') research at The Queen's University of Belfast, Flax Byssinosis became a Prescribed Industrial Disease in 1965.

1678c

SHIPBUILDING IN BELFAST IN THE EARLY TWENTIETH CENTURY: THE TITANIC ERA AND ASSOCIATED HEALTH AND SAFETY MATTERS

K Addley. *Faculty of Occupational Medicine, Royal College of Physicians of Ireland, Dublin, Ireland*

10.1136/oemed-2018-ICOHabstracts.533

In the 1830's, factory-based linen production had made Belfast the most important industrial town in Ireland and the addition of shipbuilding in the 1880's completed its transformation to a major manufacturing city. There was access to a ready pool of unskilled local labour with a robust work ethic and shipbuilding was one of the city's main employers giving it both wealth and prestige. It was a vibrant, expanding industry whose later decline greatly affected Belfast and its people. The period between 1880 – 1914 was the golden age of Belfast shipbuilding, with massive growth in the industry specialising in passenger liners, cargo-passenger ships and large ocean-going cargo vessels. During this time, Belfast was producing up to 10% of the British merchant shipping output. Harland and Wolff is the best known of the Belfast shipbuilders employing in the period 1900–20, 20 000 workers. Between 1914 – 1918 saw the beginning of a decline of shipbuilding in Belfast. Shipyard work was heavy and hazardous with many physical hazards including falls, noise and vibration. Asbestos was frequently used leading to asbestosis, pleural plaques, and pleural mesothelioma. There were safety and health shortcomings consistent with the time and a health legacy in regard to asbestos-related lung disease, mesothelioma, occupational deafness and vibration white finger. There was recognition of the potential that materials being used may have long latency health risk, avoiding complacency, also that learning from mistakes and improved engineering design and safety equipment on board vessels can markedly improve worker safety and health and save lives. The workers of the Belfast shipyard would perhaps be proud to see their story being told today as part of the regeneration of Belfast with the city moving forward after many years of conflict and decline.

1678d

OCCUPATIONAL HEALTH IN IRELAND AS A PROFESSION – THE LAST 50 YEARS. WHILE RAMAZINNI IS THE GRANDFATHER OF OCCUPATIONAL HEALTH, IS THERE AN IRISH PHYSICIAN WHO IS THE GREAT GRANDFATHER OF OCCUPATIONAL HEALTH?

JM Malone. *The Faculty of Occupational Medicine Royal College of Physicians of Ireland*

10.1136/oemed-2018-ICOHabstracts.534

The Faculty of Occupational Medicine, Royal College of Physicians of Ireland (RCPI) was founded in 1976. Its objective was to advance the science and practice of occupational medicine and to promote education, study and research in the specialty. Its core membership has all-Ireland representation, stemming from the College's Royal Charters in the seventeenth century. The Faculty has been an integral part of RCPI since its inception. The Faculty was involved in occupational medicine being recognised as both an Irish and

European Medical Specialty. It developed the Licentiate and Membership Examinations which became sought after qualifications at home and abroad. It has held annual examinations in Ireland since 1983 and holds annual overseas examinations in Malaysia since 1995 and more recently in the Al Ain. The Faculty initiated and maintains a comprehensive training scheme for its specialist doctors in training. This paper gives a chronological account of the activities of the Faculty, from the mid1970's up to current times. It is based on the archive records of the Faculty, including the minutes of the Board meetings of the Faculty and the College (RCPI). It covers that period of change that affected many disciplines involved in occupational health i.e. nurses, hygienists, toxicologists, safety officers, psychologists and others, as well as the changes that the factory doctor underwent as he/she became a 21 st century occupational physician. The role of the Faculty is to maintain integrity and professional competence of doctors engaged in occupational medicine. It operates the professional competence scheme on behalf of the Medical Council for specialist occupational health physicians.

613

OCCUPATIONAL HEALTH AND SAFETY PERSPECTIVES OF LOUISIANA FIRST RESPONDERS INVOLVED IN THE 2010 DEEPWATER HORIZON OIL SPILL

¹Johnathan Z Pangborn*, ¹Kevin J Moore, ¹Katerina M Santiago, ²Edward J Trapido, ³Wilma A Subra, ⁴Lora E Fleming, ¹Alberto J Caban-Martinez. ¹University of Miami, Miller School of Medicine, Department of Public Health Sciences, Miami FL, USA; ²Louisiana State University, School of Public Health, Department of Epidemiology, New Orleans LA, USA; ³Subra Company, Louisiana Environmental Action Network, Lower Mississippi Riverkeeper, New Iberia LA, USA; ⁴European Centre for Environment and Human Health, University of Exeter Medical School, Truro, Cornwall, UK

10.1136/oemed-2018-ICOHabstracts.535

Introduction The 2010 Deepwater Horizon oil spill is considered the largest accidental marine oil spill in United States history. The oil spill had severe environmental impacts on the United States Gulf coastline as well as far-reaching effects on the health and safety of first responders. Despite national significance of the oil spill, there is limited information documenting the long-term health and safety experience of this workforce. This study examines the occupational health and safety perspectives of first responders involved in the 2010 Deepwater Horizon oil spill.

Methods Six focus group sessions (8–10 participants each) were conducted in May 2017. Firefighters were consented and invited to complete a self-administered questionnaire, followed by a 60 min semi-structured focus group session assessing perceptions of safety and health conditions related to the oil spill event. Focus group audio files were transcribed verbatim and analysed using a general inductive approach to identify emergent themes.

Result Study participants (n=50) were mostly male (98.0%), non-Hispanic (95.3%), white (98.0%), with a mean age of 40.6 years (standard deviation [SD]=9.8), and mean job tenure of 15.3 years (SD=8.2). Among respondents, 56.3% of participants reported direct contact with oil, 36.7% visited a doctor after the oil spill, and 18.8% reported feeling chronic (≥ 3 months) musculoskeletal pain following recovery efforts. Major themes that emerged included concerns regarding personnel decontamination procedures, heat-related illnesses, ocular disorders, fear of cross-contamination, and unknown long-

term health impacts of chemical exposure from the oil spill. Firefighters expressed interest in additional safety training, worksite specific knowledge, and environmental monitoring for necessary protection of their health.

Discussion Exposure to environmental disasters may contribute to long-term health and safety consequences. Improved systemic strategies in pre-disaster recovery planning and response preparedness are needed. The potential improvement of occupational health and safety outcomes with necessary environmental monitoring procedures deserve further study.

187 THE EVOLUTION OF OCCUPATIONAL MEDICINE: A LITERATURE REVIEW

Leonel Calvano. *Universidade Brasil – São Paulo, Brasília, Brazil*

10.1136/oemed-2018-ICOHabstracts.536

The industrial revolution that occurred in the first half of the nineteenth century brought the need of occupational medicine, which originated as a medical specialty in England, to ensure high production. At that time, the workforce reached inhuman levels of production, which required intervention to be guaranteed the minimum conditions for workers. The last 20 years the concern for public health, more rigorous supervision and laws focused on the employee, along with the activities of trade unions and academics began to differentiate the health of occupational health worker, presenting broader approach and greater performance this science. Thus, occupational health and worker health are in the growth and maturation process. From this perspective the objective of this research is to analyse, through bibliographic references, the history and evolution of occupational medicine, stressing the positive aspects from its inception and still faced problems. The research was based on scientific articles, books and especially laws and regulations. The database used in this study was the websites: Google Scholar and Scielo. The keywords used only in Portuguese: History of occupational medicine; Evolution of occupational medicine and laws of occupational medicine. As a result it turns out that the development of occupational health has brought great benefits to both the employee on the company. The occupational physician acts analysing the causes and effects that the way to work or because impossibilities benefits to the employee, whether transient or permanent by analysing the activities carried out by it.

451 NEW CHALLENGES UNDER NEW PREMISES IN THE PRACTICE OF THE OCCUPATIONAL MEDICINE

Liliana Rapas. *Directorate of Public Health Bucharest/Ministry of Health, Bucharest, Romania*

10.1136/oemed-2018-ICOHabstracts.537

Introduction Occupational medicine, science and medical discipline with a practice for more than three centuries, recognises unequal development, linked with the interface human-work/occupation. This link has an accelerated growth for some companies or health systems that coexist with traditional ambience of other systems, even inside a country.

Material and methods By analogy with the three known axes O_x , O_y , O_z while time is the fourth dimension, the analysis is made by considering the four pillars, medicine, science, business, public/social policy for the ten items (the human

resources, the specialised vocabulary and communication, the service type, the medical applications for preventive, curative, emergency, recovery, the medical technology-innovation, the types of financing, Q indicators, networking by sharing the data, the working and development environments, the strategy-law) which customise and differentiate the spherical content of a medical practices with a high turnover of the scientific work dedicated to the health of both the individual and the organisation, the community, the whole society.

Outcomes and comments Even though the initial premises were focused on curative medicine for the workers with occupational diseases (B. Ramazzini, XVIII century), the practice is enlarged, generating polemics, sometimes conflicts, pointing to all the dedicated professionals and/or beneficiaries.

Our study shows that the capacity and the context of the tendering is different on the four pillars and reflects the choice or decision of the professional/doctor to ensure the management of occupational medicine in its entirety or to transfer segments of intervention to other partners. This is reflected concretely for example in standardisation (new approach for time allocation per action), in the health benefits (the surveillance of osteoporosis at workers over 55 s, new hypotheses for the bond between the exposure profile and the occupational disease roadmaps, new design for the medical-toxicology screening programmes), economic development of the clients (inside digital innovation of the medicine under new workplaces' technologies, mathematical studies for management-administration-finances)-the new themes under new premises for the medical practice in our health system.

167 THE DYNAMICS OF THE APPEARANCE OF SIGNIFICANT MONOGRAPHS AND MANUALS ON OCCUPATIONAL HEALTH IN RUSSIA

E Shigan, V Lysukhin. *FSBSI Izmerov Research Institute of Occupational Health, Moscow, Russian Federation*

10.1136/oemed-2018-ICOHabstracts.538

The history of the appearance of monographs, teaching aids and manuals on OH in Russia has a little less than two and a half centuries. The first work was the book by A.Bakherakht 'The way to preserve the health of marine workers' (1780). The author dwells in detail on the prevention and treatment seamen's diseases. A more significant event was the appearance of the book 'Diseases of workers, indicating protective measures' by A.Nikitin (1847), in which he talks in detail about the detrimental effects on health of production factors in more than 120 professions.

Undoubtedly weighty contribution was made by the teaching manuals of F.Erisman 'Professional Hygiene or Hygiene of Mental and Physical Labour' (1877) and V.Svyatlovskiy 'Factory Hygiene' (1891). In them, academic pedagogues dwell on the issues of research and analysis not only of OD, but also the hygienic aspects of the different professions working conditions. An important role was also played by the appearance of the monograph E.Dementyev 'The Factory, What It Gives to the Population and What It Borrowed' (1893), as well as the numerous scientific works of A.Pogozhev and E.Osipov.

Further it is necessary to note the textbook by D.Nikolsky 'The course of professional hygiene' (1907), S.Kaplan's monograph 'Labour and health' (1922), G.Khlopin 'Labour regime and occupational hazards' (1926), N.Vigdorchik's textbook