**1617a PERMANENT NIGHT WORK, AGE AND SICKNESS ABSENCE**

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**Introduction** Night shift work is associated with adverse health effects. Yet, some persons prefer working permanent night shifts and it is speculated that they tolerate night work better than others. The aim of is to study associations between permanent night work, age and sickness absence. Due to self-selection out of night work over time by those who experience negative effects of night work, we hypothesised that older workers with permanent night work are ‘healthy workers’ with less sickness absence compared to other groups.

**Methods** Information on working hours, age (20–34 years, 35–49 years and >50 years) and sickness absence was obtained from the Danish Working Hour Database, which contains daily information on starting and ending time of working hours based on payroll data for all employees at Danish public hospitals (2008–2015). For each year with >50 workdays, individual schedules were classified as permanent day, evening or night (>88% of work days with night work), 2-shift (day/evening, day/night or evening/day) or 3-shift (day/evening/night). We applied linear regression with individual as random intercept (participants served as their own controls) for employees (n=5774) with at least one year of permanent night work.

**Results** Employees aged >50 years had 25.6 sickness days/year when working permanent night, which is more than in all other schedules. In comparison, employees had 9.0 (sd=1.0) fewer days when working permanent day, 7.3 (sd=2.4) for permanent evening, 6.3 (sd=0.9) for day/evening, 3.2 (sd=0.6) for day/night, 5.3 (sd=1.0) for evening/night, and 5.5 (sd=0.7) for day/evening/night. There was no interaction effect between schedule and age.

**Discussion** Employees had more sickness absence when working permanent night work compared to any other schedule. The association was not modified by age and did therefore not indicate that older employees with permanent night work tolerate night work better than others.

**1617b PSYCHOSOCIAL AND HEALTH IMPLICATIONS OF AROUND THE CLOCK OPERATIONS FOR CORRECTIONS OFFICERS**

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**Introduction** Corrections officers in state and federal prisons are faced with physical and psychosocial work demands that create challenges for maintaining high levels of workability, health and personal well-being. Furthermore, features of
circumstances, including around-the-clock operations and routine pressure to participate in overtime work may have additional consequences for health and retention of an ageing correctional workforce. In this study, we examined the implications of shift work and extended work hours for officers’ ability to maintain workability, health, and well-being in the face of stressful work demands, with attention focused on officer age (chronological age and psychological age) as a risk variable for increased negative outcomes.

Methods As part of a Total Worker Health intervention study, corrections officers at a state correctional system in the northeastern USA participated in Wave 1 (n=335) or Wave 2 (n=260) of a survey that assessed physical and psychological work demands, work schedules, and several aspects of personal health and well-being. ANCOVA and moderated multiple regression analyses were used to examine the interactive effects of work schedule and age on relationships between work demands and worker health and well-being. An additional data collection in the same correctional system has recently been completed and will form the basis for follow-up analyses.

Results Initial findings indicate that corrections officers in this sample are at risk of several negative physical and mental health outcomes (e.g., obesity, depressive symptoms, burnout). Psychosocial features of corrections work, including work schedules, interacted with correctional officer age, with stronger negative consequences for several aspects of personal health and well-being among chronologically and psychologically older officers.

Conclusion In the face of an ageing corrections workforce, our findings suggest that particular attention should be paid to interventions that mitigate the impact of nightwork and overtime on the health and well-being of older officers.

**Introduction**

Night work is associated with shorter sleep and greater chronic disease risk compared with day work, and older shiftworkers report even greater difficulty sleeping compared with younger workers. We tested a sleep and circadian rhythm intervention to examine whether it improved sleep and circadian homeostasis.

**Methods**

Twenty-six healthy adults (57.6±3.9 y) who were not shiftworkers participated. Four laboratory Day shifts were followed by four Night shifts. Participants slept at home and main-