Abstracts

AN AUDIT ON THE QUALITY OF MANAGEMENT REFERRALS TO OCCUPATIONAL HEALTH SERVICE

1.2.3.4.5.6.7.8.9.10. Employees consent.

Discussion Management’s general compliance to the national management referral form was good. Specific aspects of manager’s referral can be further improved. Results were discussed at service user’s forum and a re-audit is planned in the future.

SURVEY ON HEALTH INTERVIEW SHEETS FOR ANNUAL HEALTH CHECKUPS IN JAPAN

Introduction In Japan, all workers are required by law to receive annual health checkups. Annual health checkups are composed of health-based interviews (focused on subjective and objective complaints, anamnesis, and work history, for example), laboratory tests, chest X-rays, and ECG. Because interview sheets are not standardised, they are unique to each hospital. The aim of this study is to clarify the variety of interview sheets and to consider the issues surrounding them.

Methods We requested interview sheets from each hospital with cooperation from the National Federation of Industrial Health Organisation. We investigated the items that were asked in each sheet.

Results We received 70 interview sheets. Excluding six sheets because of duplication, we analysed 64 interview sheets. Sixty-two sheets asked about anamnesis (96.9%), 61 asked about subjective and objective complaints (95.3%), and 26 asked about work history (40.6%). There were no items that were asked on all interview sheets. There were 305 detailed items of anamnesis in total. Four sheets asked about working hours, three sheets asked about overtime hours, and six sheets asked about hazardous work.

Discussion Anamnesis, subjective and objective complaints, and work history are the items designated to interview sheets by law, but there were only a few sheets containing all these items. The purpose of annual health checkups is not only to detect diseases, but also to determine whether working environments are suitable for workers’ health conditions. For this reason, these items are very important but most sheets do not include it. Subjective and objective complaints were asked for in most sheets, but details of it differed across sheets. Lifetime health management and comparisons of health checkup results are difficult because of non-standardised interview sheets. We suggest the standardisation of interview sheets in the future.

CANCER INCIDENCE IN SWEDISH FIREFIGHTERS – PRELIMINARY RESULTS OF AN EXTENDED FOLLOW-UP OF THE NOCCA STUDY

Introduction Firefighters may be exposed to a wide range of carcinogens by inhalation or dermal exposure. They also work shift which may disrupt the circadian rhythm. Previous studies have been inconsistent concerning cancer risks among
Discussion

The results indicate that age, subjective health status and the presence of pain in the chest, neurosis and anxiety play an important role in the return to work after MI. For people who restarted working, work heaviness and stress occurring at work were the major problems.

DIETARY HABITS IN OCCUPATIONALLY ACTIVE MEN WITH FIRST MYOCARDIAL INFARCTION

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Introduction

Only a few studies have been undertaken to analyse the dietary habits of people with cardiovascular diseases. The aim of this study was to evaluate the dietary behaviours of working people after the first acute cardiovascular incident.

Methods

In the study Functional Activity Questionnaire (FAQ) was used. The study was performed in two groups: the first group were all men hospitalised during one year in two clinics of cardiology, professionally active until the first myocardial infarction (MI). It comprised 243 men, aged 26–70 years. The reference group consisted of 403 men, blue- and white-collar workers aged 35–65 years. Frequency of consumption of each product among patients with acute myocardial infarction and in the reference group was calculated using basic methods of descriptive statistics. Multivariate logistic regression model was used to determine the risk factors for myocardial infarction. All statistical analyses were performed using the STATISTICA version 8MR 3 c software.

Results

Body mass index of MI patients was significantly higher (p=0.006). The frequency of consumption of particular products in MI group and in the reference group differed significantly for 11 of 21 products. Patients with MI significantly less frequently reported daily consumption of fruits, raw vegetables, cheese, vegetable fats and fish. In this group consumption of salty (p=0.0226) or fatty (p<0.0001) foods were significantly higher.

Discussion

It has been shown that after adjusting for age, education and type of work, the daily consumption of fish, salads and cooked vegetables, fruits and vegetable oils significantly reduced the risk of myocardial infarction. Increased MI risk was associated with obesity and preference for fatty foods. We found, that the diet significantly modified risk of MI in examined workers. This indicates that an important part of prevention activities among working people should be an education about proper dietary habits.