

Introduction Recent studies suggest that female workers face a greater risk of long-term chronic disease than male workers. A 2008 Mexican study indicated that older female workers have an elevated prevalence of arthritis, diabetes, and hypertension compared to men. A recent U.S. study showed that women working long hours have an elevated risk for chronic disease later in life compared to men. South Korean researchers reported that women in nonstandard jobs are more likely to suffer chronic mental disorders. However, little is known about why female workers have a comparatively greater risk of long term chronic disease.

Methods This study involves conducting a systematic literature review followed by a meta analysis of studies involving chronic disease among working women, particularly focusing on populations of working women who are aged fifty and older. The review also focuses on identifying distinctive aspects of women's work in specific occupational groups in an international context.

Result Initial results from the analysis suggest several explanations: a) the evidence is relatively strong that working long hours for extended periods of time raises the likelihood for chronic disease, b) the literature suggests that shift work and disruption of circadian rhythms among women can create long-term chronic health problems, c) women are often required to perform multiple roles at home and work which place greater stress on the women's ability to meet those additional responsibilities, d) because of those obligations, many working women may not have sufficient time to take care of their health, and e) some demanding physical tasks might be difficult to perform because of inherent gender-based biological constraints (e.g., performing heavy materials-handling tasks).

Discussion More specific empirical study of the reasons for elevated chronic disease risk among working women is needed. Additionally, workplace-based interventions to screen affected women for chronic disease should be adopted.

548

THE MEDIATING ROLE OF RECOVERY OPPORTUNITIES ON FUTURE SICKNESS ABSENCE FROM A GENDER- AND AGE-SENSITIVE PERSPECTIVE

¹JS Boschman, ²A Noor, ¹JK Sluiter, ²M Hagberg*. ¹Academic Medical Centre, University of Amsterdam, Department: Coronel Institute of Occupational Health, Amsterdam Public Health research institute, Amsterdam, The Netherlands; ²Occupational and Environmental Medicine, Sahlgrenska Academy and University Hospital, University of Gothenburg, Gothenburg, Sweden

10.1136/oemed-2018-ICOHabstracts.1504

A lack of sufficient recovery during and after work may help to explain impaired health in the long run. We aimed to increase knowledge on the mediating role of recovery opportunities (RO) during and after work on future sickness absence from a gender- and age-sensitive perspective. We used data on RO from a Swedish national survey in 2011 and linked these to sickness absence (>14 days) two years later among the general working population (n=7,649). Mediation of the relationship between gender and sickness absence by exposure to RO was studied through linear regression. We conducted separate analyses for RO during and after work and for three different age groups (16–29; 30–49; 50–64). The sample consisted of 3563 men and 4086 women. Sickness absence was higher among the women than among the men (11 days vs 5 days,

p<0.001). Men reported statistically significantly more positive on their RO than women. RO during (β 0.3–1.8) and after work (β 0.4–0.6) mediated the relationship between gender and sickness absence. Mediation effects existed across age groups, with the strongest effects of RO during work found among the age group between 50 and 64 years of age (attenuation 36%). Our results indicate that gender inequality is also reflected in worse RO among women. This partially explains the increased risk of future sickness absence, particularly among those above 50 years of age. These findings show that RO during work deserve more attention in working life research.

594

URINARY INCONTINENCE AND INTENTION TO LEAVE CURRENT JOB

¹Heather Pierce*, ¹Lin Perry, ²Robyn Gallagher, ³Pauline Chiarelli. ¹University of Technology Sydney, Australia; ²Charles Perkins Centre, University of Sydney, Australia; ³University of Newcastle, Australia

10.1136/oemed-2018-ICOHabstracts.1505

Introduction Urinary incontinence (UI) is a condition prevalent in women, with negative impact on psychosocial health and quality of life. The aim of this study was to examine the relationship between urinary incontinence and work.

Methods An electronic survey was distributed between May 2014 and February 2015 to members of the New South Wales Nurses and Midwives Association in Australia. Urinary incontinence prevalence and severity was investigated using the International Consultation on Incontinence Questionnaire Urinary Incontinence – Short Form. Demographic, general and female reproductive health data known to influence the reporting of UI were collected. Investigated work characteristics included: work role, contract, shift, job satisfaction and plans to leave current job. Data analyses included female respondents and excluded those with a current pregnancy or urinary tract infection 'sometimes or often' in the last 12 months.

Results The final sample size was 2,907, of mean age 47.35 years (19–74±11.58); mean Body Mass Index 28.09 kg/m² (15–57±6.41); 69.9% were parous. The prevalence of any UI in the past 4 weeks was 32.0% (95% CI: 30% to 34%; n=930). Slight severity UI was present in 55.2%, moderate UI in 40.5% and severe UI in 4.4%. Those with severe UI were more dissatisfied with their work (p=0.001) and more likely to intend to leave their current position in the next 12 months than those with slight or moderate symptoms (OR: 2.26; 95% CI: 1.02 to 5.01) after accounting for age, Body Mass Index, parity, anxiety, depression, work contract, shift and job satisfaction.

Conclusion UI is a health concern for women in the workforce, associated with reduced job satisfaction and an intention to leave current job. The findings of this study flag the need to raise the awareness of this common condition in the workplace as UI is a treatable and preventable condition.

682

GENDER EQUITY IN EDITORIAL BOARDS OF MEDLINE INDEXED OCCUPATIONAL SAFETY & HEALTH JOURNALS

¹Priyanka Roy*, ²Soumyadeep Bhaumik. ¹Department of Labour, Government of West Bengal, India; ²Public Health Foundation of India, India

10.1136/oemed-2018-ICOHabstracts.1506