Discussion Return to work rates of cancer patients were high after completion of the multidisciplinary rehabilitation program. A multidisciplinary rehabilitation program which combines occupational counselling with a supervised physical exercise program is likely to result in improved return to work rates, reduced fatigue and increased importance of work, work ability, and improved quality of life.

365

COSTS OF WORK DISABILITY AND MANAGING OCCUPATIONAL SAFETY AND HEALTH: EVIDENCE FROM FINLAND

Pauli Forma*. Keva, Helsinki, Finland

10.1136/oemed-2018-ICOHabstracts.1546

Introduction Work disability is a fundamental problem in ageing societies. In its various forms, this incurs substantial costs for employers and the society. Better identification of the work disability would presumably encourage employers to pay attention to its prevention. This study explores first the costs that work disability (disability pension, accidents at work, absence from work due to illness, occupational health care) incurs in the public sector in Finland. Second it is analysed how employers could reduce work disability and related costs. Methods Calculation of the total costs of work disability among the public sector employers in Finland. Assessments have been made about organisation's actions to minimise these

Result The costs of work disability represent an average of 10% of the total salaries paid by the organisations in the study. There are considerable differences in costs between various organisations. The differences may be caused by differences in age, gender and job structures as well as the employers' methods to prevent work disability. The costs caused by absence from work due to illness form the largest category.

Discussion Better identification of costs might help reduce work disability and the related costs. Organisations could achieve significant savings and improvements in productivity by focusing on reducing work disability. The society would benefit from reducing work disability in terms of longer working careers. A financial perspective is a useful approach when the objective is to reduce work disability and the resulting costs. Presently, there are many challenges related to the data on work disability and analysing it. However, digitalisation obviously leads to significant improvements here in the near future.

371

EMPLOYER-RELATED BARRIERS AND FACILITATORS FOR WORK PARTICIPATION OF CANCER SURVIVORS: A SYSTEMATIC REVIEW OF QUALITATIVE STUDIES

¹MA Greidanus*, ¹AGEM de Boer, ³CM Tiedtke, ²AE de Rijk, ³B Dierckx de Casterlé, ¹MHW Frings-Dresen, ¹SJ Tamminga. ¹Academic Medical Centre, Coronel Institute of Occupational Health, APH, Amsterdam, The Netherlands; ²Maastricht University, Department of Social Medicine, CAPHRI, Maastricht, The Netherlands; ³Katholieke Universiteit (KU) Leuven, Department of Public Health and Primary Care, Leuven, Belgium

10.1136/oemed-2018-ICOHabstracts.1547

Introduction Employees with cancer consider return to work (RTW) a key aspect of cancer survivorship. Employers are in the position to guide employees with cancer, but also express

a need for support. The objective of this study is therefore to identify employer-related barriers and facilitators for work participation of employees with cancer, from the perspective of both employers and employees with cancer, and to synthesise these to understand their perceived consequences.

Methods A systematic review of qualitative studies focussing on perspectives of employers and employees with cancer on work participation of employees with cancer was performed. Four databases (MEDLINE, EMBASE, PsycINFO, Business Source Premier) were systematically searched. The CASP checklist was used to assess the quality of included studies. Perceived barriers and facilitators were extracted and synthesised to conduct a content analysis.

Result Five studies representing the employers' perspectives and 47 studies representing perspectives of employees with cancer were included. Employees with cancer perceived barriers and facilitators related to support, communication, work environment, discrimination and perception of work ability. Employers perceived barriers and facilitators related to support, communication, RTW policies, knowledge about cancer, balancing interests and roles, and attitudes. Synthesis showed that the employers' willingness to support can be understood by: their perceptions of the employee with cancer, their goals, and national and organisational policies. The employers' ability to support is related to their knowledge about cancer and the (availability of) RTW policies.

Discussion A large variety of perceived employer-related barriers and facilitators for work participation of employees with cancer were identified, underlining the importance and complexity of the role of the employer. The perceived barriers and facilitators were understood to be related to both employers' willingness and ability to support. There is a need for RTW interventions targeting employers, to enhance the sustainable work participation of employees with cancer

412

RETURN TO WORK AND WORK SUSTAINABILITY AMONG JAPANESE CANCER SURVIVORS

Motoki Endo*. Department of Public Health, Tokyo Women's Medical University, Tokyo, Japan

10.1136/oemed-2018-ICOHabstracts.1548

Introduction In developed countries, the population ages with increasing cancer survival rates, the proportion of working-age cancer survivors is expected to increase. In Japan, it seems that there has been more interest in follow up for employees who returned to work after sick leave due to cancer. The aim of this study is to investigate work sustainability of cancer survivors after RTW and to make 'Evidence Book for work among cancer', 'Guidance for work among cancer survivors, stratified by cancer type', 'Card between clinics and companies, stratified by cancer type'.

Methods We collected sick leave data of 1278 cancer survivors in a registered Health Data. This is supported by a Health Labour Sciences Research Grant, Japan (Endo-Han). As for 'Evidence Book', we collected our previous studies and others. As for 'Guidance' and 'Card', we made six project team by cancer type (breast cancer, colon cancer, gastric cancer, genitals malignancies, lung cancer etc).

Result According to our previous studies, 47.1% returned to work full time within 6 months of their initial day of sick leave absence, and 62.3% by 12 months. The cumulative

RTW rate varied significantly by cancer type. Of workers who returned to work after their first episode of leave after cancer, more than 50% continued to work after 5 years in large-scaled companies. There was a steep decrease in work continuance rates during the first year after RTW, with considerable differences according to cancer site.

Discussion It is very important for companies (especially smalland medium-sized companies) to establish and improve their RTW support system for employees with cancer.

431

INVESTING IN WORK ABILITY OF PATIENTS WITH IBD: RESULTS OF A PILOT PROJECT ACTIV84WORK (ACTIVATE FOR WORK)

¹M-N Schmickler, ²S Coenen, ³D Staes, ³F Wieme, ⁴T Swinnen, ⁵X Dekeuleneer, ⁶T van Hooland, ⁷K van den Cruys, ²S Vermeire. ¹Mensura Occupational Health Services, Belgium; ²Translational Research Centre for Gastrointestinal Disorders, Catholic University of Leuven, Belgium; ³Crohn's and Ulcerative Colitis Association, Belgium; ⁴SD Worx, Global Payroll and HR Service Provider, Belgium; ⁵Proximus, Telecommunications Service Provider, Belgium; ⁶Abbvie, Biopharmaceutical research and development, Belgium; ⁷Novellas Healthcare, International Healthcare Recruitment, Belgium

10.1136/oemed-2018-ICOHabstracts.1549

Introduction Symptoms of inflammatory bowel disease (IBD) (e.g., diarrhoea, urgency, incontinence, and/or fatigue) often make it difficult to actively participate in the workplace and commute to and from work, especially during flare-up periods. Activ84worK was a pilot project to stimulate professional activity and reduce absenteeism in IBD patients by providing them with more flexible working conditions, including teleworking.

Methods Starting in April 2015, IBD patients were recruited for participation by a patient association and the gastroenterology department at University Hospital Leuven. Interested patients were contacted for screening and follow-up throughout the program. Both employees and their employers were followed over a six-month period. The first and last contacts were face-to-face meetings with employees and employers. Five intermediate contacts with employees were conducted by phone or email. The project was evaluated from three perspectives: benefits of teleworking for the employee, benefits for the employer, and the effect on society by measuring absenteeism.

Results Between April 2015 and October 2016, 71 patients showed interest, 19 were eligible to participate, and 14 completed the program. All patients expressed their enthusiasm for teleworking and other tailored and flexible working conditions. Interviews indicated that removing work-related stress factors such as not having a toilet nearby resulted in employees feeling much more at ease. For most patients, this led to lower absenteeism, higher work ability, and lower costs for employers and society. The project was viewed positively by employees and employers alike. More openness was created between both parties and the taboo on the disease was lifted, which had an overall positive impact on patients' work-life balance.

Discussion This pilot project showed that teleworking and flexible working hours improved professional activity among IBD patients. The results could be used to inspire policy-makers and employers to give maximum support to chronically ill people eager to work.

464

COST-EFFECTIVENESS OF A MULTIMEDIA CAMPAIGN TO IMPROVE COPING WITH NON-SPECIFIC LOW BACK PAIN

¹Arnela Suman, ¹Frederieke G Schaafsma*, ²Rachelle Buchbinder, ³Maurits W van Tulder, ¹Johannes R Anema. ¹Dept. of Public and Occupational Health, VU University Medical Centre, Amsterdam Public Health research institute, The Netherlands; ²Monash Dept. of Clinical Epidemiology, Monash University, Melbourne, Australia; ³Dept. of Health Sciences, VU University Amsterdam, Amsterdam Public Health research institute, Netherlands

10.1136/oemed-2018-ICOHabstracts.1550

Introduction Specific low back problems are a common and costly problem in Western societies. The vast majority (88%) of these costs are caused by indirect costs, including job absenteeism, productivity losses, and disability. To reduce these costs, a multimedia campaign was developed for patients with low back pain. This campaign aimed to improve patient cognitions and knowledge regarding back pain, and stimulated active coping including continuing work.

Methods We recruited patients via general practitioners and physiotherapists, and used a RCT design for evaluation. We compared the multimedia campaign to usual care. The campaign consisted of an interactive website, video films, social media and monthly newsletters. Social media included Facebook, Twitter and a patient forum. During the follow-up period of one year cognitions, knowledge, quality of life, absenteeism, and direct and indirect costs were measured and analysed for all patients.

Results 779 patients with low back pain participated, of which 448 patients in the control group and 331 patients in the intervention group. The average age was 56 years, and most patients were women, with a high level of education and a Dutch nationality. In the control group, 232 participants had a paid job, of which 121 reported a physically demanding job. In the intervention group, 183 participants had a paid job, of which 88 reported a physically demanding job. The campaign had no effect on cognitions. The campaign was cost-effective for quality of life, but not for back pain cognitions. The costs for loss of productivity at work were higher in the control group than intervention group, resulting in a potential saving of € 748 per person.

Discussion This multimedia campaign was not effective in improving cognitions in patients with low back pain, but could lead to a reduction in absenteeism costs. From a societal perspective, the campaign was cost-saving.

470

COLLABORATIVE FACTORS ASSOCIATED WITH POSITIVE ECONOMIC OUTCOMES IN WORK DISABILITY MANAGEMENT – A MULTIPLE CASE STUDY WITH MIXED METHODS

T Leino*, I Pehkonen, J Turunen, P Juvonen-Posti. Finnish Institute of Occupational Health, Helsinki, Finland

10.1136/oemed-2018-ICOHabstracts.1551

Introduction Cost of lost labour input in Finland exceed 24 billion € per year. The aim of the study was to find out the content and processes of work ability management and the factors that make it productive. Information of a 20 financial units from Finnish companies employing 600–11 500 were collected from the period 2008 to 2013.