The intervention proved overall positive effects on severity of HD symptoms, supporting the benefits of skin care in the workplace. The fact that the intervention showed a larger effect in a subgroup with mild symptoms suggests that this intervention might be of particular importance for primary prevention.

05B.6 OCCUPATIONAL CONTACT DERMATITIS AND HOW THE COMMUNITY RESPONSES IN DEVELOPING COUNTRY

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10.1136/OEM-2019-EPI.121

Background Dermatologic disorders generally have a major impact on patients daily activities, psychological and emotional state and social relationships in a resource poor setting. Country with different climate zones and environment as well as traditional use of herbal and increasing use of pesticides contact dermatitis is one of the important occupational hazards in construction workers, nearby people and it often leads to poor quality of life of the workers with substantial financial loss.

Methods This study was conducted in three different geographic population. Free health camp was organized with total 310 cases of dermatologic problems were registered in Skin OPD last two years. Patients includes children to geriatric population both male and female groups.

Results Out of the total 42% were male and 58% were female patients. Contact dermatitis were found among 28% of the patients, age and sex had no significant role on prevalence of Contact dermatitis. Urban area patients have tendency due to hair dye, industrial cement and detergents, however rural area patients have causation due to herbal plants (Parthenium dermatitis) and traditional occupational works. Both have nickel, atopic and unknown cause. Foot was the most commonly involved site (25.7% of patients). Atopy was present in 18 patients (25.7%). A total of 22 irritant reactions were noted in 13 patients. Most of the patients neglect the contact dermatitis due to lack of health information and use of irrational medication also seen.

Conclusion Most of the contact dermatitis is preventative and manageable in time. Due to Climate, geographical areas, literacy difference community preventive health program plays important role, it. Prick-Patch testing, Teledermatology and Geographical information system is another future perspective for dermatology disease mapping in Nepal so that the government can make essential policy, programs for communities so that we can prevent and treat the contact-dermatitis on time.

Mini-Symposium 3: Military Epidemiology

05C.1 THE NZ VIETNAM VETERAN FAMILY STUDY: A MULTI-GENERATIONAL PERSPECTIVE ON HEALTH AND WELLBEING

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Background The serious impact of Vietnam service on New Zealand veterans arose from high levels of combat

experience and exposure to chemical agents including Agent Orange. In 2009, we assembled a cohort of 2783 men and 23 women Vietnam veterans. They had significantly increased risks of head and neck cancer and chronic lymphatic leukaemia, with high rates of hospitalisation for renal failure and drug and alcohol problems. Overseas data indicates that families have been affected by relationship difficulties, with subsequent risks of adverse psychological outcomes in children. There have been few longitudinal studies which include a comprehensive exposure assessment (the exposome) and include both veteran and family, which is what we propose.

Study population Using the cohort data, the electoral roll and an information campaign, we will recruit veterans, their spouses and their children for follow up. For all groups, we will obtain data to inform the general exposome through a base-line health survey using some of the brief measures deployed in our 'contemporary veterans' study, including the Post Traumatic Checklist (Civilian or military) for PTSD, and the Brief Family Relationship Scale exposure history.

The specific exposome, including chemicals and 'other' specific exposures, will be recorded by on-line questionnaire and subsequent interview.

Effects will be assessed through linkage to the Birth Defects Register, Mortality Collection, routine datasets for hospital discharge, and the Cancer Registry, using comparisons with national rates where appropriate. Most importantly, permission will be sought to flag individuals at the Cancer Registry, with access to blood or tissue samples facilitating the identification of genomic 'effect biomarkers'. We hope that the method will be extended to other cohorts and for future deployments.

05C.2 LONG TERM PHYSICAL AND MENTAL HEALTH IMPACT OF MILITARY SERVICE

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Background There is emerging recognition of the important co-morbidities and long term relationships between physical and psychological health in military and veteran populations. The aim was to investigate the longitudinal relationships between multisymptom illness (MSI) and psychological disorders.

Methods A cohort of 1990–1991 Gulf War veterans and military comparison group was assessed at Wave 1 (2000–2002) and Wave 2 (2011–2012), including military service characteristics, symptoms, modified Centers for Disease Control (CDC) definition of MSI, the posttraumatic stress disorder (PTSD) Checklist (PCL), and Alcohol Use Disorder Identification Test (AUDIT). The Composite International Diagnostic Interview (CIDI v.2.1) assessed psychological disorders using DSM-IV criteria. Incident cases were defined as participants who did not meet criteria for a health outcome at Wave 1 but met these criteria at Wave 2.

Results Overall participation at Wave 2 was 1390/2779 (50.0%); 99.8% completed a health questionnaire including 1356 male participants who were included in these analyses. The adjusted incident rate ratio (IRR) of MSI at Wave 2 was higher for those with, compared to those without, CIDI-