opportunities for occupational and environmental particulate matter measurement system.

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Introduction Heavy metal like mercury was used directly or indirectly since long ago before it was stopped around the world. Since, the value of the metal and its availability in different use in medical appliances is still one of the burdens in developing country like Nepal. The main uses of mercury are in dental amalgam, sphygmomanometers, and thermometers. The mercury once released into the environment can remain for a longer period. Both acute and chronic poisoning can be caused by it. Half of the mercury found in the atmosphere is human generated and health care contributes the substantial part to it. WHO and UNEP issued new guideline for health care sector to become mercury free.

Aim and methods To find out the Knowledge, attitude and practice due to hazards of mercury contact among paramedics and patients.

Results and conclusion 938 paramedics and 890 patients were asked indepth structured questions about mercury hazards and update knowledge. Overall 18% of the paramedics have no knowledge of mercuryfree with respect to 69% of the patients. Around 49% of paramedics have broken mercury thermometer in their career and contact with skin. However, 1.2% patient only have a similar history in their life time. 4% of the contamination with mercury having SKIN problems. 32% of the patients still have mercury thermometer and sphygmomanometer in their home with respect of 0.6% of paramedics. The above study showed that Healthcare worker has more knowledge of Mercury hazards than patients groups. However, paramedics have broken the mercury instruments than patients party. Similarly, Paramedics have Mercury free device at home than patients groups. It means awareness, literate people having more knowledge towards its practice making mercury free society in a resource poor country like Nepal.

Introduction Military service can involve exposure to physical and psychological stressors. There has been little systematic research into the health and wellbeing of military personnel after they leave the services.

Methods 4326 Transitioned ADF (transitioned from regular Australian Defence Force service between Jan 2010–Dec 2014) (18% response) and 8480 Regular 2015 ADF (42%) completed a questionnaire including symptoms, doctor-diagnosed medical conditions, respiratory health, injuries, pain, sleep problems, lifestyle factors, self-perceived health and quality of life and health service use.

Results Transitioned ADF reported a higher mean number of symptoms (16.4 vs 11.8), similar mean number of medical conditions (1.9 vs 1.5), were more likely to report some medical conditions (a circulatory, musculoskeletal/connective tissue or nervous system condition, high blood pressure, chronic low back pain, and hearing loss), a slightly higher mean number of service-related injury types (1.11 vs 0.96), and poorer self-perceived health and quality of life compared to 2015 Regular ADF. Service-related injuries were more likely to have been sustained during training than on deployment in both groups. The majority of Transitioned ADF and 2015 Regular ADF reported experiencing some pain intensity and disability.

In Transitioned ADF, poorer physical health outcomes overall were all were reported in Department of Veterans’ Affairs (DVA) clients compared with non-DVA clients, in Ex-Serving compared with Active Reservists or Inactive Reservists, and in those who had been medically discharged compared with those discharged for other reasons.

Conclusion This was one of the first studies internationally to investigate a comprehensive range of physical health indicators in recently transitioned military personnel. Overall Transitioned ADF were more likely to report poorer physical health across domains, some subgroups appeared particularly at risk. Findings in DVA clients were consistent with DVA being the conduit for care in veterans who have a service-related injury or mental health condition.

Introduction Taxi drivers in Korea are known to work long hours and receive low wages. In addition, there are various forms of working, so that they can work 12 hours a day for 2 shifts, work only at night or day time, and drive a car whole day alone (14–15 hours a day). We surveyed their specific hours of work, and smoking and caffeine consumption. In this study, 11 business sites were selected for taxi companies in Seoul considering region and workplace size, and survey was conducted for all taxi drivers belonging to the relevant business sites. The questionnaire consisted of demographic characteristics, working hours and working conditions, violence experience, emotional labor status, physical and mental health status, sleep health, traffic accidents and traffic violation experience. A total of 698 respondents (39.6%) answered the questionnaire. 76.2% were working 25–26 days a month. 49.2% of the workers worked more than 60 hours per week and less than 70 hours per week. 52.8% of drivers were current smokers, and 65.9% of those who work fixed night shift were current smokers.
Factors related to lower urinary tract symptoms of female workers in the electronic parts industry in Khon Kaen province


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Background: Lower urinary tract symptoms (LUTS) are more common in women than men. The causes of LUTS come from many factors. Working factor might be one of them. Leading to a study of working factors and non-working factors related to LUTS at electronic parts factory in Khon Kaen province.

Methods: The case-control study was performed. The total of 236 cases (female worker who has at least one symptom of LUTS) and 236 controls (female workers who don’t have the symptoms) was done by simple random sampling. Research tool is the self-administered questionnaire. Data were analyzed by SPSS Version 19, EpiInfo for calculate odds ratio, 95% CI, Pearson’s chi-square test and Mann-Whitney U test.

Results: Conveyor does not statistically significant related to LUTS (AOR=0.88, 95% CI (0.59,1.30)). Factors that significantly related to LUTS are 1. History of LUTS in a last year [AOR=4.80, 95% CI (2.64,8.73)] 2. inadequate number of glasses, drinking water glasses [AOR=2.15, 95% CI (1.06,4.36)] 3. inadequate number of toilet [AOR=1.97, 95% CI(1.24,1.97)] 4. Holding bladder [AOR=1.56, 95% CI(1.24,1.97)].

Conclusion: Conveyor is not a statistically significant factor for LUTS. Statistically significant factors related to LUTS are history of LUTS in a last year, insufficient number of glasses, insufficient number of toilet and holding bladder.

Increased benefit generosity and the impact on workers’ compensation claiming behaviour: An interrupted time series study in Victoria, Australia

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Objective: To measure the effect of legislated increases to workers’ compensation benefits on claiming behaviour.

Methods: Interrupted time series of workers’ compensation claims in Victoria, Australia (2008–2012), assessing 1) the overall effect of the legislation and 2) raising the wage replacement cap on higher earners, by condition type, in reference to a comparator of other Australian workers’ compensation jurisdictions.

Results: Overall claiming increased 11.7%, driven largely by musculoskeletal condition claims. There was no detectable effect on disability duration overall, though back/neck conditions were up 26.9%. Among higher earners, there was mixed evidence of an increase in claiming, though disability durations were up 32.9%, which was also driven by back/neck conditions. There was mixed evidence of an effect on mental health claims, suggesting either no response or a negative response to benefit generosity.

Conclusions: Findings mainly align with existing evidence: more generous benefits increase claiming and disability durations, primarily driven by back/neck musculoskeletal conditions. However, some mixed findings by injury group and among higher earners raise questions about confounders such as co-occurring events.

Trends in prevalence of obesity according to occupational group: The Korean National Health and Nutrition Examination survey

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Objectives: This study was designed to provide recent trends of obesity among workers in Korea, and identify whether there was difference across occupational group.

Methods: We used data from Korean National Health and Nutrition Examination survey phase I to VI (1998–2015) to analyze trends in prevalence of obesity in Korean adult workers. Obesity was defined as a BMI of 25 kg/m2 or higher. Occupation was classified into 3 groups; a) non-manual worker, b) service/sales worker, c) manual worker.

Result: During the period from KNHANES phase I to VI, the prevalence of obesity in male workers increased in all occupations as a whole (31.1% to 39.5% in manual worker, 32.3% to 38.2% in service/sales worker, 25.3% to 39.7% in manual worker). In contrast, female workers did not show a particular tendency except for a significantly decreasing in the prevalence rate in service/sales workers (30.8% to 23.9%, p for trend 0.0048).

Conclusions: The trends of obesity prevalence by gender and occupation were different. Especially for male manual-workers, the prevalence rate has increased steadily during the period, while it has decreased steadily in female sales/service workers. These results can be used to select vulnerable groups that can be applied to obesity prevention programs first.