[0.04–0.26], pa=0.000; ORa= 0.16; 95% CI = [0.06–0.4] and p=0.001; ORa= 0.15; 95% CI = [0.05–0.44] respectively).

Conclusion Our results confirmed the role of lifestyle and occupational factors in increasing the risk of developing PC. Further prospective studies are required before any definitive conclusion.

COVID 19

P-300 WORK PRODUCTIVITY AMONG HEALTHCARE WORKERS WITH POST COVID-19 SYNDROME

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Introduction Over time, the phenomenon of persistent symptoms after COVID-19 infection has evolved from non-specific symptoms to a clinical entity known as post-covid-19 syndrome, which can lead to disabilities. The aim of this study is assess the impact of post-Covid-19 syndrome on health professionals and its implications on professional activity.

Methods This is a cross-sectional, analytical study conducted over a two-month period and including all health care staff at the Nabeul University Hospital. The evaluation of work productivity was carried out by the questionnaire ‘Work Productivity and Activity Impairment Questionnaire’.

Results Our study involved 89 health workers. The average age of the population was 41.2±10.6 years with a sex ratio 7.95). The most persistent symptoms were headache (61.3%), asthenia (59%), and dyspnea (31.8%). The drop in productivity and daily activities were significantly higher in patients who developed post-covid-19 syndrome (p=0.015 and p=0.002 respectively). However, there was no significant difference between the two groups in terms of absenteeism and presenteesism (p=0.42 and p=0.2 respectively).

Conclusion Guidelines for the management of post-COVID syndrome based on established criteria are needed to enhance its outcome.

Climate change

P-303 INFLUENCE OF WEATHER AND AIR POLLUTION ON THE OCCURRENCE OF SUDDEN DEATH FROM CARDIOVASCULAR CAUSES IN THE REGION OF SOUSSE (TUNISIA)

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Introduction Sudden cardiac death (SCD) remains a major public health problem. Its incidence varies considerably between countries suggesting its interaction with the external environment. This study aims to analyze the influence of climate and air pollution on the occurrence of SCD in the region of Sousse (Tunisia).

Methods A total of 229 cases in the forensic department of Farhat Hached Academic hospitals in Sousse (Tunisia) were enrolled in the study over a 7-year period. An analysis of two time series (environmental data and SCD cases) was performed. Climatic data were collected from the National Institute of Meteorology. Air pollution data were obtained from the National Institute of Meteorology.

Musculoskeletal disorders

P-302 DETERMINANTS OF MULTISITE MUSCULOSKELETAL DISORDERS IN THE WORKPLACE

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Introduction Musculoskeletal disorders (MSDs) are a major occupational health problem worldwide. The majority of available data on the subject focus on MSDs defined by the anatomical sites. The aim of this study is to describe the profile of workers with multisite MSDs and to identify the socio-demographic, medical, and occupational factors related to these disorders.

Methods This is a cross-sectional, analytic study conducted among patients who consulted at an University Hospital in Tunisia for MSD between January 2018 and December 2019. The study population was subdivided into two groups; a group of patients with a single MSD site (G1) and a group of patients with two or more sites (G2). Data collection was based on a preestablished synoptic sheet including medical, socio-demographic, and professional characteristics of the participants.

Results A total of 118 patients were enrolled with 49 cases (41.5%) for G1 and 69 cases (58.5%) for G2. The occurrence of multisite MSDs was significantly associated with female gender (p<10–3), hyper solicitation of the upper limbs (p=0.021), and work in the garment industry (p=0.045). Clinically, there was a significant association between multisite MSDs and overweight (p=0.009), existence of comorbidities (p<10–3), history of hypertension (p=0.048) and heart disease (p=0.049), and long-term use of medications (p=0.001). After binary logistic regression, two factors were independently associated with the occurrence of multisite MSDs female gender (p=0.002; ORa= 3.8; ICa95%= [1.6–9]) and the existence of comorbidities (p=0.03; ORa= 3.5; ICa95%= [1.54–7.95]).

Conclusion In our study, multisite MSDs were associated with individual and occupational factors. Since individual risk factors are fixed, the prevention of multisite MSDs must target the modifiable factors constituting the employee’s professional environment. Adequate prevention based on an ergonomic approach, including awareness raising, early detection, and workplace layout would be necessary.